A Rorschach Investigation of Psychopathy in a Sample of Incarcerated Females

Sarah A. Baird
Pacific University

Recommended Citation

This Dissertation is brought to you for free and open access by the College of Health Professions at CommonKnowledge. It has been accepted for inclusion in School of Graduate Psychology by an authorized administrator of CommonKnowledge. For more information, please contact CommonKnowledge@pacificu.edu.
A Rorschach Investigation of Psychopathy in a Sample of Incarcerated Females

Abstract
The personality disturbance of psychopathy is one of the most researched and debated conditions in psychopathology and has been considered one of the most important constructs in the criminal justice system. This syndrome has been widely examined in males but remarkably less attention has been given to females, even though contemporary researchers and theorists have suggested that there is a different expression of psychopathy based on gender. The current study utilized the Rorschach Inkblot Method and the Psychopathic Personality Inventory-Revised (PPI-R) to explore the personality characteristics of 77 incarcerated females. Participants were imprisoned for a variety of offenses and were recruited from a medium-security state prison. The level of psychopathy, as determined by the PPI-R, was compared to a select number of Rorschach variables that measure self-perception and interpersonal functioning. In addition, a Rorschach composite score of the variables used in the study was created with the aim of developing a profile for psychopathic females. The association between psychopathy and these variables was investigated using Pearson correlations and hierarchical regression analyses. Results partially confirmed the hypotheses of the study in that certain, but not all, hypothesized Rorschach variables were related to level of psychopathy. In general, results suggested that females do not display disturbance in self-perception and instead demonstrated evidence of psychological mindedness. Most results regarding interpersonal relationships were consistent with prior research findings that psychopathic females are more interpersonally-oriented and seek out attention from others, but also experience dysfunction in their interactions. As a whole, results provided some additional support to the growing notion that psychopathic females have a histrionic/hysterical personality organization, as opposed to the grandiose, narcissistic personality structure of their male counterparts. Explanations for and implications of these results were discussed, and directions for further research were explored.

Degree Type
Dissertation

Degree Name
Doctor of Psychology (PsyD)

Committee Chair
Michelle R. Guyton, Ph.D.

Second Advisor
Adam Furchner, Ph.D.

Keywords
Psychopathy, Rorschach, Females, Incarcerated, Personality, Self-perception, Interpersonal Relationships

Subject Categories
Psychiatry and Psychology

This dissertation is available at CommonKnowledge: https://commons.pacificu.edu/spp/83
A RORSCHACH INVESTIGATION OF PSYCHOPATHY
IN A SAMPLE OF INCARCERATED FEMALES

A DISSERTATION
SUBMITTED TO THE FACULTY
OF
SCHOOL OF PROFESSIONAL PSYCHOLOGY
PACIFIC UNIVERSITY
HILLSBORO, OREGON

BY
SARAH A. BAIRD, M.S.

IN PARTIAL FULFILLMENT OF THE
REQUIREMENTS FOR THE DEGREE
OF
DOCTOR OF PSYCHOLOGY

JULY 24, 2009

APPROVED: _______________________________
Michelle R. Guyton, Ph.D.

_____________________________
Adam Furchner, Ph.D.

PROFESSOR AND DEAN: _______________________________
Michel Hersen, Ph.D., ABPP
ABSTRACT

The personality disturbance of psychopathy is one of the most researched and debated conditions in psychopathology and has been considered one of the most important constructs in the criminal justice system. This syndrome has been widely examined in males but remarkably less attention has been given to females, even though contemporary researchers and theorists have suggested that there is a different expression of psychopathy based on gender. The current study utilized the Rorschach Inkblot Method and the Psychopathic Personality Inventory-Revised (PPI-R) to explore the personality characteristics of 77 incarcerated females. Participants were imprisoned for a variety of offenses and were recruited from a medium-security state prison. The level of psychopathy, as determined by the PPI-R, was compared to a select number of Rorschach variables that measure self-perception and interpersonal functioning. In addition, a Rorschach composite score of the variables used in the study was created with the aim of developing a profile for psychopathic females. The association between psychopathy and these variables was investigated using Pearson correlations and hierarchical regression analyses. Results partially confirmed the hypotheses of the study in that certain, but not all, hypothesized Rorschach variables were related to level of psychopathy. In general, results suggested that females do not display disturbance in self-perception and instead demonstrated evidence of psychological mindedness. Most results regarding interpersonal relationships were consistent with prior research findings that psychopathic females are more interpersonally-oriented and seek out
attention from others, but also experience dysfunction in their interactions. As a whole, results provided some additional support to the growing notion that psychopathic females have a histrionic/hysteric personality organization, as opposed to the grandiose, narcissistic personality structure of their male counterparts. Explanations for and implications of these results were discussed, and directions for further research were explored.

Keywords: Psychopathy, Rorschach, Females, Incarcerated, Personality, Self-perception, Interpersonal Relationships
DEDICATION

This dissertation is dedicated to my stepfather, Steve Hoff, who has been my biggest enthusiast throughout my education and who has, most importantly, always brought a smile to my face and reminded me to have fun with my academic pursuits.
ACKNOWLEDGEMENTS

I would like to express my gratitude to my dissertation committee members, Dr. Michelle Guyton and Dr. Adam Furchner, for their support and encouragement, particularly with the data collection process and for their faith in my Rorschach abilities. I would also like to thank my fellow colleagues, Pamela Buchanan, Melissa Ramsey, and Amy Schlapper for their assistance with scoring and data collection; I truly appreciate that you volunteered your time to help me when I was overwhelmed with Rorschachs to administer and psychopathy inventories to score.

Finally, my family and dear friends have given me invaluable support, reassurance, and comfort. A big thank-you goes to my mother and stepfather, Cathy and Steve, especially for your emergency consultations. Also, to my devoted partner, Bryan – we did it. We have so much to celebrate; the best is yet to come. Last but not least, to my most charming pets, Quimby and Rascal – thank you for your “help” with scoring Rorschachs and making sure that I took frequent breaks from this project.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABSTRACT</td>
<td>ii</td>
</tr>
<tr>
<td>DEDICATION</td>
<td>iv</td>
</tr>
<tr>
<td>ACKNOWLEDGMENTS</td>
<td>v</td>
</tr>
<tr>
<td>LIST OF TABLES</td>
<td>viii</td>
</tr>
<tr>
<td>INTRODUCTION</td>
<td>1</td>
</tr>
<tr>
<td>LITERATURE REVIEW</td>
<td>4</td>
</tr>
<tr>
<td>Background Literature</td>
<td>4</td>
</tr>
<tr>
<td>The History of the Concept of Psychopathy</td>
<td>4</td>
</tr>
<tr>
<td>Other Aspects of Conceptualization</td>
<td>11</td>
</tr>
<tr>
<td>Diagnostic Considerations</td>
<td>12</td>
</tr>
<tr>
<td>Psychopathic Personality Style and Organization</td>
<td>14</td>
</tr>
<tr>
<td>Gender</td>
<td>18</td>
</tr>
<tr>
<td>Assessment of Psychopathy</td>
<td>22</td>
</tr>
<tr>
<td>Psychopathic Personality Inventory</td>
<td>24</td>
</tr>
<tr>
<td>Rorschach Inkblot Method</td>
<td>28</td>
</tr>
<tr>
<td>Relationship between Rorschach Variables and Psychopathy</td>
<td>31</td>
</tr>
<tr>
<td>Current Study</td>
<td>35</td>
</tr>
<tr>
<td>Statement of the Problem</td>
<td>35</td>
</tr>
<tr>
<td>Purpose of the Study</td>
<td>37</td>
</tr>
</tbody>
</table>
METHOD .................................................................43

Participants .................................................................43

Measures ...........................................................................45

Procedure ...........................................................................48

RESULTS ...........................................................................52

PPI-R Results .................................................................53

Rorschach Results ..........................................................53

Relationship between Psychopathy and the Rorschach ....54

DISCUSSION .....................................................................58

PPI-R Scores and Demographic Data ..................................4

Hypothesis 1: Psychopathy and Self-Perception ....................4

Hypothesis 2: Psychopathy and Interpersonal Relationships ....11

Hypothesis 3: Psychopathy and Rorschach Composite Score ....12

Overall Study Objective: Creation of Rorschach Profile ........14

Conclusions .......................................................................18

Clinical Implications .........................................................22

Limitations of the Study ....................................................24

Strengths of the Study .......................................................28

Future Directions ..............................................................31

REFERENCES ....................................................................75

APPENDIX A: INFORMED CONSENT .................................82
## LIST OF TABLES

<table>
<thead>
<tr>
<th>Table</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Table 1</td>
<td>Cleckley’s (1976) Criteria for Psychopathy</td>
<td>7</td>
</tr>
<tr>
<td>Table 2</td>
<td>The 20-items of PCL-R (Hare, 1991, 2003)</td>
<td>9</td>
</tr>
<tr>
<td>Table 3</td>
<td>Descriptions of Rorschach Variables (Exner, 2003)</td>
<td>48</td>
</tr>
<tr>
<td>Table 4</td>
<td>Descriptive Statistics for Rorschach Variables</td>
<td>54</td>
</tr>
<tr>
<td>Table 5</td>
<td>Intercorrelations Between Rorschach Variables and Psychopathy Score</td>
<td>55</td>
</tr>
<tr>
<td>Table 6</td>
<td>Summary of Hierarchical Regression Analysis for Rorschach Variables Predicting Psychopathy Score</td>
<td>57</td>
</tr>
</tbody>
</table>
INTRODUCTION

Psychopathy is a personality construct that has been the focus of a substantial amount of research and debate over the past few decades. It is often studied in a forensic context, particularly regarding violence, recidivism, and treatment response, and has been described as the one of the most important constructs of the criminal justice system (Hare, 2006). Although psychopathy has been studied intensively, it remains one of the most controversial syndromes in psychopathology (Lilienfeld, 1998).

There is a disproportionately higher presence of psychopathy in prison and forensic settings. Specifically, the prevalence of psychopathy has been estimated at 1% of the general population but up to a quarter of prison populations in the United States (Hare, 2006). The fact that individuals with psychopathy are overrepresented in criminal and incarcerated samples provides strong rationale for the importance of understanding the factors that underline this character disturbance (Vitale & Newman, 2008).

Gaining a solid understanding of the dynamics of the psychopathic character has significant implications, particularly for treatment. There is a widely held belief among clinicians that psychopathic individuals are notoriously difficult, if not impossible, to treat (Cunliffe & Gacono, 2005). In fact, evidence has suggested that some forms of treatment designed for criminal offenders resulted in an increase in post-treatment criminal behavior (for a review see Hare, 2006 and Harris & Rice, 2006). In a recent review, Harris and Rice (2006) concluded that none of the treatments that have been applied to psychopaths have
been effective in reducing violence or crime. However, they also emphasized that this does not mean that psychopathic individuals are essentially untreatable (D’Silva, Duggan, & McCarthy, 2004).

Statement of the Problem

Despite the large amount of research and discussion that has been generated over the past two centuries about the psychopathic character, this area of psychology is not without gaps and problems. Two major areas in need of further review were relevant for this study. First, the examination and study of psychopathic females has been largely neglected, with males receiving the vast majority of attention. Only in recent years have researchers shifted their attention to how psychopathy is manifested in females. Findings from this research suggested that although there are important similarities, the female presentation of psychopathy departs from the male presentation in significant ways (Cunliffe & Gacono, 2005; Verona & Vitale, 2006). Second, despite many decades of research on the assessment of psychopathy, the use of self-report measures remains challenging and controversial (Lilienfeld & Fowler, 2006). There has been a movement towards a personality-based approach in conceptualization, but there is still a need for research conducted from a more pure personality-based approach.

Purpose of the Study

The purpose of this study was to contribute to the growing knowledge base about the psychopathy syndrome in a novel way, specifically by examining the implications of gender on the psychopathic personality as assessed by two measures that are grounded in a personality-based approach. This was accomplished by comparing relevant Rorschach variables to a self-report, personality-based measure of psychopathy, with the aim of
furthering the understanding of how psychopathy is manifested in an incarcerated female population. Incarcerated female offenders were administered the Rorschach Inkblot Method (Rorschach, 1942) using the Comprehensive System (Exner, 2003) and the Psychopathic Personality Inventory-Revised (PPI-R, Lilienfeld & Widows, 2005).

The “psychostructural” (Exner, 2003) and psychodynamic approaches outlined by Gacono and Meloy (1994) were utilized in this study. In addition, psychoanalytic and psychodynamic theory regarding character structure was consulted to further understand the psychopathic personality. The purpose of this study was not to examine the ability of either measure to diagnose psychopathy or discriminate psychopaths from non-psychopaths; instead the aim was to further understand the personality construct that drives psychopathic/antisocial behavior in females. Both the Rorschach and the PPI-R have been used or developed for this purpose (Gacono, Loving, & Bodholdt, 2001; Lilienfeld & Andrews, 1996; Lilienfeld & Widows, 2005).

A critical examination of the psychopathy literature was conducted, which focused on the conceptualization and the assessment of psychopathy. First, I outlined the history of the psychopathy construct and reviewed theories regarding how to conceptualize psychopathy. I examined the literature on the hypothesized personality structure that underlies psychopathy, focusing on psychodynamic theory. Then I discussed the implications of gender on the manifestation and conceptualization of psychopathy. Finally, I provided a review of the literature on the assessment of psychopathy, focusing on the PPI-R and the Rorschach.
LITERATURE REVIEW

Background Literature

Psychopathy is a personality disturbance that can be understood as a constellation of affective traits, interpersonal qualities, and behaviors. The core affective, interpersonal, and behavioral attributes of psychopathy have largely been agreed upon (Hare, 2006). Interpersonally, psychopathic individuals are superficial, charming, manipulative, callous, and grandiose. In terms of affect, psychopathic individuals lack guilt, remorse, and other non-superficial emotions, and are unable to bond emotionally with others. Psychopathic people demonstrate an unstable, self-defeating lifestyle, which is characterized by antisocial behaviors and actions and a disregard for social norms or conventions. Psychopathy has also been described in terms of psychodynamic theory; Meloy (1988) described psychopathy as “a deviant developmental disturbance characterized by an inordinate amount of instinctual aggression and the absence of an object relational capacity to bond” (p. 5). Considering the type of person that emerges when these attributes work in together concert, it is no wonder that psychopathy has held a long-standing place in descriptions of criminality and personality disorders and is one the most researched conditions in psychopathology (Lilienfeld & Widows, 2005).

The History of the Concept of Psychopathy

The syndrome now referred to as psychopathy has been the subject of active debate and interest for the past two centuries. Although controversy remains regarding the origins
and conceptualization of the psychopathic syndrome, general characteristics and features have been noted throughout psychiatric history. The psychopathic disturbance has been referred to under an array of labels and the implications of this disturbance, in terms of clinical and social consequences, have changed and evolved. Despite the changing labels, a constant goal was to classify this group so that psychopathy could be clearly distinguished from other forms of mental illness and from general criminality (Vitale & Newman, 2008).

Pinel (1806/1962) coined the term *manie sans delie* in reference to a thought-provoking group of psychiatric patients. He observed and documented how certain individuals continually engaged in self-destructive and impulsive behaviors yet displayed intact reasoning (Meloy, 1988). Pinel’s conceptualization evolved into a broader understanding of these individuals in terms of morality, specifically as being morally depraved (Rush, 1812) or morally insane (Prichard, 1835). In addition to moral considerations, some theorists, notably Kraepelin (1915), offered biologic explanations for the nature of this disturbance. Finally, Birnbaum (1914) introduced the term *sociopath*, in order to emphasize a social learning component and psychogenic nature of the disorder. For the first quarter of the 20th century a biogenic and moral inferiority conceptualization of psychopathy was predominant (Meloy, 1988).

Psychoanalytic theorists also contributed to the debate about the psychopathic character. In Meloy’s (1988) comprehensive text, *The Psychopathic Mind*, he noted that psychoanalysts entered this discussion at a time when biogenic and psychogenic influences of psychopathic behavior were considered divergent, although psychoanalysts reframed these two lines as convergent and complimentary. Cleckley, in the many editions of his work *The Mask of Sanity*, has provided one of the most comprehensive definitions and pictures of the
psychopathic character. Meloy described how Cleckley first conceptualized psychopathy as a concealed psychotic disturbance and how some of Cleckley’s psychopathy criteria have psychodynamic implications. Cleckley’s (1976) latest edition portrays an evolution in his thought, specifically that the psychopathic character is better understood as a borderline level of personality organization (Kernberg, 1975), as opposed to a psychotic level of organization, specifically when considering the psychopath’s level of reality testing, use of defenses, and level of identity integration (Meloy, 1988). The work of Karpman, another prominent psychopathy theorist, was also largely influenced by psychoanalytic thought (Meloy, 1988).

Cleckley’s *The Mask of Sanity* (1976) is the seminal description of psychopathy. His work was in part motivated by the desire of 19th and early 20th century nosologists to classify the psychopathic syndrome as distinct from other forms of mental illness and general criminal behavior (Vitale & Newman, 2008). *The Mask of Sanity* provided a comprehensive outline of 16 core features of psychopathy (see Table 1), as well clinical case descriptions of fifteen psychopathic individuals, including two women. These psychopathic attributes consisted of personality traits and behaviors, such as lack of remorse or shame, poor judgment and failure to learn from experience, lack of guilt and empathy, failure to form emotional bonds, superficial charm, and impulsive, antisocial behavior. According to Cleckley, the most striking feature about psychopathic individuals is the seemingly intact reasoning capabilities and the “convincing mask of sanity” that cannot be penetrated (p. 386). He wrote:

...despite these intact rational processes, these normal emotional affirmations, and their consistent application in all directions, we are dealing here not with a complete man at all but with something that suggests a subtly constructed reflex machine which can mimic the human personality perfectly. (p. 369)
Table 1.

*Cleckley’s (1976) Criteria for Psychopathy*

<table>
<thead>
<tr>
<th>Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Superficial charm and good “intelligence”</td>
</tr>
<tr>
<td>Absence of delusions and other signs of irrational thinking</td>
</tr>
<tr>
<td>Absence of “nervousness” or psychoneurotic manifestations</td>
</tr>
<tr>
<td>Unreliability</td>
</tr>
<tr>
<td>Untruthfulness and insincerity</td>
</tr>
<tr>
<td>Lack of remorse or shame</td>
</tr>
<tr>
<td>Inadequately motivated antisocial behavior</td>
</tr>
<tr>
<td>Poor judgment and failure to learn by experience</td>
</tr>
<tr>
<td>Pathologic egocentricity and incapacity for love</td>
</tr>
<tr>
<td>General poverty in major affective reactions</td>
</tr>
<tr>
<td>Specific loss of insight</td>
</tr>
<tr>
<td>Unresponsiveness in general interpersonal relations</td>
</tr>
<tr>
<td>Fantastic and uninviting behavior with drink and sometimes without</td>
</tr>
<tr>
<td>Suicide rarely carried out</td>
</tr>
<tr>
<td>Sex life impersonal, trivial, and poorly integrated</td>
</tr>
<tr>
<td>Failure to follow any life plan</td>
</tr>
</tbody>
</table>

Karpman (1941, 1948a, 1948b), another prominent theorist around Cleckley’s time, developed an influential typology theory of psychopathy. Karpman (1941) was the first to introduce the idea that psychopathy has variants, which he labeled primary and secondary psychopathy. He argued that although these variants of psychopathy can look the same on a surface level, the etiology of and underlying drive for their behavior is very different (1941, 1948b). Specifically, he conceptualized primary psychopathy as idiopathic and a reflection of a core deficit—in other words, the constitutional make-up of a person’s character. In this sense, he considered only primary psychopathy to reflect true psychopathy (Karpman, 1948b). On the other hand, secondary psychopathy was argued to be a reflection of neurotic
conflicts that are the product of environmental causes and injuries. The primary, idiopathic, psychopath is thus conceptualized as guiltless, while the secondary, symptomatic, psychopath is motivated by unconscious guilt (Meloy, 1988). Essentially, although these psychopathic groups may display similar behaviors, the underlying cause of the behavior or the basis for the external manifestations is quite different.

The conceptualization of psychopathy has evolved since Cleckley’s seminal writings. Psychopathy still has been conceptualized as a unitary construct, but it has been theorized that the psychopathy construct is comprised of two related but distinct factors (Hare, 1991, 2003; Hare, Hart, & Harpur, 1991; Harpur, Hart, & Hare, 1994; Karpman, 1941; Levenson, Kiehl, & Fitzpatrick, 1995; McHoskey, Worzel, & Szyarto, 1998). The two-factor approach originated from Hare, in his work of the development of the Psychopathy Checklist (PCL, 1980). Hare and colleagues found that psychopathy could be conceptualized as one construct that contains two main factors (Hare, 1991, 2003; Harpur, Hakstian, & Hare, 1988; Harpur, Hare, & Hakstian, 1989). The PCL/PCL-R items that comprise the two factors are provided in Table 2. Factor 1 consists of personality traits such as egocentricity, manipulativeness, deceitfulness, and having a lack of remorse, empathy, and anxiety. In general, these traits reflect interpersonal and affective characteristics that are fundamental to conceptualizing psychopathy (Hare et al., 1991) and are consistent with Cleckley’s conceptualization. Factor 2 refers to antisocial behaviors and an unstable, self-defeating lifestyle. The behaviors reflect impulsivity, intolerance of frustration, a quick-temper, lack of long-term goals, lack of responsibility, and poor behavioral control (Levenson et al., 1995; McHoskey et al., 1998). Although the two-factor approach has been predominant, in recent years researchers have hypothesized that the most accurate factor structure of psychopathy could include three or
Table 2.

*The 20-items of PCL-R (Hare, 1991, 2003)*

<table>
<thead>
<tr>
<th>Factor 1</th>
<th>Factor 2</th>
<th>Other items that did not load on either factor</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. Conning/Manipulative</td>
<td>12. Early Behavioral Problems</td>
<td></td>
</tr>
<tr>
<td>6. Lack of Remorse or Guilt</td>
<td>13. Lack of Realistic, Long-Term Goals</td>
<td></td>
</tr>
<tr>
<td>8. Callous/Lack of Empathy</td>
<td>15. Irresponsibility</td>
<td></td>
</tr>
<tr>
<td>16. Failure to Accept Responsibility for Own Actions</td>
<td>18. Juvenile Delinquency</td>
<td></td>
</tr>
<tr>
<td>19. Revocation of Conditional Release</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

four factors (Cooke & Michie, 2001; Williams, Paulhus, & Hare, 2007).\(^1\)

The two-factor approach also has been integrated with the primary and secondary psychopathy typology theory. Levenson and colleagues (1995) developed the Self-Report Psychopathy Scale (SRPS) as a measure of psychopathy for a non-criminal, non-institutionalized sample. Their goal was to create a measure of primary and secondary psychopathy, informed by Karpman (1948b), that also would be consistent with the two-factor approach as defined by the PCL. In other words, it was their goal to construct items for their primary and secondary psychopathy scales that were as similar as possible to the PCL’s

\(^1\) Currently, there remains debate about which model of psychopathy is most valid and useful. Over the past decade, researchers have focused more on models with three or four factors of psychopathy as opposed to the original two-factor model. At this time, no one model has been shown to be significantly more accurate than any other (Neumann, Malterer, & Newman, 2008).
Factor 1 and Factor 2, respectively. In addition to developing a reliable and valid measure of the psychopathic personality (Forth, Brown, Hart, & Hare, 1996; McHoskey et al., 1998), they demonstrated that primary and secondary psychopathy are significantly correlated with each other.²

Other researchers have furthered the conceptualization debate by suggesting that psychopathy, traditionally considered to be a relatively unitary construct, could be best understood as consisting of specific variants or homogenous subgroups (Skeem, Johansson, Andershed, Kerr, & Louden, 2007; Skeem, Poythress, Edens, Lilienfeld, & Cale, 2003). Skeem and colleagues (2003), who were influenced by Karpman’s (1941, 1948a) typology theory, conducted a comprehensive literature review to find evidence for the notion of psychopathic variants. They explored variants within the interpersonal and affective personality traits of psychopathy, as opposed to distinguishing variants based solely on behavior. They noted that their reasoning for this was to utilize an approach that was consistent with Cleckley’s original conceptualization.

Skeem and colleagues (2003) concluded that modern theories and empirical research have produced evidence in support of psychopathy variants. Specifically, primary and secondary psychopathy can be differentiated based on a number of factors such as etiology, degree of neuroticism, level of affective deficits and impulsivity, and the degree of borderline and narcissistic personality traits. This has been supported by further research; Skeem and colleagues (2007) found that in a group of violent offenders, secondary psychopaths demonstrated more trait anxiety, more features of borderline personality disorder, and poorer interpersonal functioning when compared to primary psychopaths, despite the fact that both

---

² The results from the two-factor approach research can also be considered evidence in support of the existence of variants of psychopathy, as suggested by Skeem and colleagues (2003). However, I am not suggesting that Factor 1 and Factor 2 are synonymous with primary and secondary psychopathy, respectively.
groups demonstrated similar amounts of antisocial behavior. Overall, this area of research has substantial implications for the conceptualization, research, and treatment of psychopathy, specifically because it highlights the importance of the affective, personality-based dimensions of psychopathy as first emphasized by Cleckley and Karpman.

**Other Aspects of Conceptualization**

Two additional approaches in the conceptualization of psychopathy include the behavior-based approach and the personality-based approach. The differences between them have important implications for both theory and assessment (Lilienfeld, 1998). The behavior-based conceptualization entails focusing on antisocial behaviors and criminal acts and generally is consistent with the *Diagnostic and Statistical Manual* (DSM-IV, American Psychiatric Association, 1994) model of psychopathology. The features of secondary psychopathy are captured with this approach, specifically with the diagnosis of Antisocial Personality Disorder (ASPD). The personality-based conceptualization originated with Cleckley’s (1976) work and emphasizes core personality traits and character structure as well as interpersonal skills. Similarly, aspects of primary psychopathy are captured by this approach. Proponents of this approach regard antisocial behavior to be subordinate in diagnosing psychopathy (Lilienfeld, 1998). More specifically, they have argued that the antisocial behaviors are manifestations of personality traits, rather than the personality traits themselves. Therefore, assessing behavior alone is not as meaningful or accurate.

An additional, complementary framework in which to conceptualize psychopathy are the categorical (taxonomical) approach and the dimensional approach. The categorical conceptualization entails that one either “has” psychopathy or does not, according to clinical standards and definition. On the other hand, conceptualizing psychopathy as a dimension
involves assessing it as characteristics that exists along a continuum (Levenson et al., 1995; McHoskey et al., 1998). The dimensional approach to psychopathy, as opposed to the categorical approach, has recently been considered the most beneficial (Forth et al., 1996; Levenson et al., 1995; McHoskey et al., 1998), although this debate has not been resolved (Skeem et al., 2003). In addition, there has been an argument for employing both the categorical and dimension approach. Meloy (1988) emphasized that psychopathy represents both a category and a continuous psychological disturbance, and noted the former is relevant for diagnostic purposes and the latter is useful in terms of treatment.

Diagnostic Considerations

Despite the consequences of the actions and the interpersonal style of psychopathic individuals, psychopathy has never been listed as a psychiatric disorder in the DSM. In early versions of the DSM, the criteria for ASPD and Sociopathy included characteristics (such as selfishness, impulsivity, and callousness) that overlapped with some of Cleckley’s psychopathy criteria, but these DSM criteria were never meant to portray psychopathy (Vitale & Newman, 2008). Nevertheless, psychopathy has been used interchangeably with sociopathy and ASPD, and often has been subsumed under the umbrella of the ASPD diagnosis. However, this practice of blending these character disturbances has proved to be problematic and invalid (see Gacono & Meloy, 1994 and Gacono, Loving, & Bodholdt, 2001 for a detailed review). This is particularly true when considering the vast heterogeneity within the ASPD diagnosis, which has been examined at length elsewhere (e.g. Gacono, 1990; Gacono et al., 2001; Lilienfeld, 1998).

The relationship between psychopathy and ASPD has been largely considered and established (see Widiger, 2006). There is evidence that a psychopathic individual often will
meet criteria for ASPD but only a small subset of those with ASPD will also meet criteria for psychopathy. For example, only one-third of inmates who meet criteria for ASPD also meet criteria for psychopathy (Hare, 1991). In addition, the base rates of psychopathy and ASPD are quite different, with significantly more individuals meeting criteria for ASPD. In forensic populations it has been estimated that 50% to 80% of the population meets diagnostic criteria for ASPD with psychopaths comprising only 15%-25% of that same population (Gacono et al., 2001). Similarly, Hare (2006) reported that the forensic population prevalence of ASPD is 50% and the prevalence of PCL-R defined psychopathy is less than 30%. The DSM diagnosis of ASPD is based on behavioral criteria that overlap with criminality and only considers few personality attributes of primary psychopathy. Therefore, ASPD is conceptually more highly related to the antisocial lifestyle of psychopaths (Factor 2) but weakly associated with affective and interpersonal factors (Factor 1; Hare, 2006).

Gacono and colleagues (2001) asserted that the label of ASPD no longer contributes anything to answering whether an individual is psychopathic in the traditional sense. However, they also suggested that the DSM-IV does have some utility in conceptualizing psychopathy in that psychopathy can be understood as a disturbance that is comprised of certain behavioral and affective features of all Cluster B Personality Disorders (Antisocial, Narcissistic, Histrionic, and Borderline Personality Disorders; Gacono, Gacono, & Evans 2008).

I provided a more thorough discussion of the relationship between psychopathy and the various Cluster B disorders and/or character styles in the following sections. Briefly, the relationship between Narcissistic Personality Disorder (NPD) and psychopathy scores on the PCL-R has been examined (see Widiger, 2006 for a review) and psychodynamic theorists
also have contributed to this discussion (Gacono & Meloy, 1994; Gacono, Meloy, & Berg, 1992; Gacono, Meloy, & Heaven, 1990). In addition, the association between ASPD and histrionic personality has been examined by many researchers (e.g. Gacono et al., 1990; Lilienfeld, Van Valkenberg, Larntz, & Akiskal, 1986; Meloy, 1988).

Psychopathic Personality Style and Organization

The use of DSM-defined personality disorders in the conceptualization of psychopathy has been meaningful in that it has provided a framework and a common language. However, a limitation of using DSM diagnoses is that they are based on and assigned according to behavioral criteria. Therefore, it is necessary to expand upon DSM diagnoses by examining character structure, personality style, and levels of personality organization. Literature on this topic has been generated by many researchers; however, the work of Kernberg, Meloy, and Gacono has provided the foundation for the theories and hypotheses discussed in this study.

The work of psychoanalyst Otto Kernberg is highly pertinent to the efforts to conceptualize and define psychopathic individuals. Notably, Kernberg (1975) developed a psychostructural framework of personality organization. Within this framework, he proposed that personality organization could be classified into three broad levels of functioning - psychotic, borderline, and neurotic. The factors that discriminate between these levels of functioning are one’s capacity for reality testing, level of identity integration, and types of defensive operations that one typically employs.

Researchers have argued that psychopathic individuals operate at a borderline level of personality organization (Gacono, 1990; Gacono et al., 1992; Meloy, 1988). The borderline level of personality is defined by the following specific features/characteristics. Regarding
defensive operations, individuals at a borderline level of functioning utilize primitive defenses, such as denial, projective identification, and splitting (McWilliams, 1994; Meloy, 1988). Their level of identify integration is characterized by inconsistency and discontinuity. Furthermore, when asked to describe themselves or others, individuals with borderline organization are typically global and simplistic, and they convey “a basic defect in the sense of self” (p. 62, McWilliams, 1994). Finally, individuals with borderline organization are adequately able to discriminate and discern reality, even though, at the same time, they adamantly deny their psychopathology (Kernberg, 1975; McWilliams, 1994, Meloy, 1988).

Meloy (1988) stated that there was evidence of the borderline functioning hypothesis Cleckley’s writings, because the later editions of Cleckley’s texts reveal a shift in Cleckley’s thinking that is more in with Kernberg’s borderline level of functioning. In addition, Gacono (1990) found that male felons who met criteria for severe psychopathy were more borderline in their functioning than those with low or moderate levels of psychopathy, as evidenced by the severe psychopaths producing a greater number of borderline object relations responses.

It is essential to not confound borderline character organization with the DSM Borderline Personality Disorder (BPD). A similarity between the BPD and psychopathy groups is they both demonstrate primitive/borderline object relations (Gacono et al., 1992) but they have important differences. First, individuals with BPD have notably more difficulty regulating affect and their internalized object relations than psychopaths (Gacono 1990; Gacono et al., 1992). Gacono and colleagues have attributed this finding to the deficit of internal human objects and the presence of a grandiose self-structure in psychopathic individuals. The grandiose self-structure functions to protect psychopathic individuals from the dysfunction, disorganization, and anxiety that characterize people with BPD. In addition,
individuals with BPD demonstrated a capacity for attachment and their anxiety motivates them to reach out to other people (Gacono et al., 1992). This is a notable departure from the detached and devaluing interpersonal orientation that psychopathic individuals espouse.

The characteristics of narcissism and grandiosity have been long associated with psychopathy. In fact, psychodynamic theorists have conceptualized psychopathy as an extreme and pathological variant of NPD (Gacono et al., 1990; Kernberg, 1975; Meloy, 1988). In addition, Harpur and colleagues (1989) provided empirical support for the notion that narcissistic personality and psychopathy are related, as they found that Factor 1 of the PCL was significantly associated with a measure of narcissism. The authors concluded that the Factor 1 items that are indicative of narcissism should be considered central to the psychopathic personality. Similarly, McHoskey and colleagues (1998) conducted a study on undergraduates examining the relationship between narcissism and Levenson’s SRPS. They found that narcissism was strongly associated with primary psychopathy and moderately associated with secondary psychopathy.

As noted, psychopathy has been conceptualized as an aggressive, extreme variant of NPD. However, Meloy (1988) outline key characteristics that distinguish an individual with psychopathy from an individual with NPD. First, he noted that the psychopath’s primary way of relating to another person is through aggression, in the interest of gratifying their aggressive needs. In addition, psychopathic individuals exhibit cruel and sadistic behavior and they do not demonstrate any motivation or interest in morally justifying their behavior. Meloy concluded that this was indicative of an absence of an integrated superego and/or an ego ideal. Also, Meloy described how psychopathic individuals are less vulnerable to experiencing depressed affect; instead, paranoid ideation is believed to emerge when under
stress. In general, these interpersonal and self characteristics are central in discriminating psychopathy.

Finally, the relationship between psychopathy (or, at times, antisocial personality) and Histrionic Personality Disorder (HPD) has also been examined. Psychodynamically speaking, the commonality between hysteria and psychopathy is believed to be the presence of dissociative defenses and states, such as impulsivity, confusion of reality and fantasy, and dramatic expression of affect (Meloy, 1988). In addition, some of Cleckley’s (1941) central characteristics of psychopathy are similar to the DSM-IV criteria for HPD, such as shallow emotions, manipulativeness, and seductiveness (Hamburger, Lilienfeld, & Hogben, 1996). Gacono and colleagues (1990), in their study of male felons, discussed the connection between antisocial personality and both narcissism and hysterical personality. The authors concluded that narcissism and hysteria are character traits and personality styles that may influence the severity and the manifestation of psychopathy. In a study on psychopathy in college undergraduates, Hamburger and colleagues (1996) found that the presence of psychopathy was a significant predictor of ASPD and HPD traits. A discussion about their findings regarding gender as moderator variable, as well as a more comprehensive discussion on gender as related to psychopathy and histrionic character, has been provided in the next section.

In all, psychopathy and the Cluster B disorders share many traits, such as impulsivity, shallow affect, egocentricity, poor identity integration, and primitive object relations and defensive processes (Gacono, 1990, Gacono et al., 1992; Gacono et al., 1990; Gacono & Meloy, 1994; Meloy, 1988). At this time, the most solid conclusion from the research is support for the hypothesis that psychopathy is an extreme and aggressive variant of NPD,
specifically a variant that is organized at a borderline level of functioning (Gacono, 1990; Gacono et al., 1990; Kernberg, 1975; Meloy, 1988). However, it is essential to interpret the findings from these studies in the context that they have been conducted exclusively with a male population; therefore, these conclusions regarding character style may not apply to psychopathic females.

Gender

The picture of a prototypical psychopath has emerged from two centuries worth of study largely on criminal and psychiatric males, while the investigation of the psychopathic female is still in its infancy (Cunliffe & Gacono, 2008). Cleckley (1976) included case descriptions of two women in his seminal text on the prototypes of the psychopathic character. Nevertheless, the study of psychopathy in women has been largely neglected until recently (Verona & Vitale, 2008). Overall, the investigation concerning psychopathy and gender has been hindered by the fact that the psychopathic disposition traditionally has been studied in males, particularly in incarcerated populations. One explanation for this problem is the fact that men make up the vast majority of the inmate population (Cunliffe & Gacono, 2005; Gacono & Meloy, 1994).

In recent years, problems with methodology, specifically group-assignment, also have hindered research on psychopathy in women. Cunliffe & Gacono (2005) identified 20 studies in which the PCL-R was used with female inmates but noted that these studies contained a number of methodological problems that limit their usefulness in contributing to the understanding of psychopathy. For example, they described a paucity of psychopaths (PCL-R

---

3 The exception to this statement is Widom’s (1977) study that was conducted to determine if female prisoners fit with Cleckley’s psychopathy description. A limitation to this study was the measures that were used focused primarily on the antisocial behavioral aspects of psychopathy, as opposed to the affective-interpersonal features (Vitale & Newman, 2008).
in the samples and the inappropriate use of screening instruments. Most researchers have investigated females who either display some psychopathy features or meet criteria for APD, but generalizing the results to female psychopaths is not appropriate (Gacono et al., 2001; Nicholls et al., 2005).

Researchers have investigated the prevalence, base rates, and severity of psychopathy in females. Overall, evidence has indicated that the base rates of psychopathy in women are slightly less than their male counterparts, but these results have not been consistent (for a review see Verona & Vitale, 2006). In addition, researchers have found that females score lower than males on measures of psychopathy. During the development of the PCL-R, Hare (1991) found that females obtained a lower global psychopathy score (4-6 points) than males. However, Verona & Vitale (2006) noted that findings such as this are countered by other studies in which no gender differences were found. Nonetheless, in order to account for a discrepancy in scores, researchers have hypothesized that psychopathy may manifest differently across genders (Cunliffe & Gacono, 2005; Gacono et al., 2001; Hamburger et al., 1996; for a review see Nicholls, Ogloff, Brink, & Spidel, 2005).

Psychopathy researchers have looked at personality disorders that might underlie psychopathic behavior in order to test the hypothesis of different manifestations of psychopathy in men and women (Verona & Vitale, 2008). As previously discussed, the most prominent researchers in this area are Meloy and Gacono, and their work is most relevant to the purposes of and theory behind this study. In general, Meloy, Gacono, and colleagues have demonstrated that males and females with psychopathy display similar behaviors but they have contended that the personality or character structure that motivates these behaviors is not equivalent across genders.
To summarize the findings, researchers have argued that a histrionic or hysterical character style organized at a borderline level of functioning underlies female psychopathy (Cunliffe & Gacono, 2005; Gacono & Meloy; 1994; Meloy, 1988). Individuals with a hysterical character at a neurotic level of organization will differ from those organized at borderline levels as evidenced by more mature defenses, ego function, and a capacity for attachment (Gacono & Meloy, 1994). By contrast, a female psychopath would exhibit primitive defense mechanisms and would have severely impaired object relations. It is the hysterical character that distinguishes the psychopathic female, as the central personality style in psychopathic males is considered to be narcissistic. Gacono and Meloy (1994) noted hysteria and narcissism for females and males respectively could be a necessary but not sufficient component of psychopathy.

Cunliffe & Gacono (2005) hypothesized that the histrionic/hysterical character of psychopathic females would serve as an ineffective structure in fending off depression and dysphoria. On the other hand, they noted that the psychopathic male narcissistic character structure is more successful in preventing a depressive breakdown (Meloy, 1988; Gacono & Meloy, 1994). Cunliffe and Gacono tested this hypothesis by examining Rorschach variables that assess negative self-perception, poor interrelatedness, and impaired reality testing, all of which they contended would provide evidence for the depressive breakdown that occurs with psychopathic females organized at borderline level of histrionic/hysteric character. The specific findings of their study have been discussed at length at the end of this review. To summarize, the main area of difference between Cunliffe and Gacono’s findings for psychopathic women and the previously established literature for psychopathic males is the presence in females of a pervasive and chronic negative self-image and the absence of a
grandiose self-structure. In other words, psychopathic females experience themselves as strongly more negative and do not receive a sense of pleasure related to their inordinate self-focus. In order to compensate for this pervasive displeasure, psychopathic hysterical females will seek out positive attention and admiration from others (Cunliffe & Gacono, 2005).

Lilienfeld and colleagues (1986) conducted a study to test previous reports of a relationship between HPD, ASPD, and somatization disorders. Their most noteworthy finding was a significant relationship between antisocial personality and histrionic personality within the same person. Specifically, they concluded that gender was a moderator for whether individuals with HPD are likely to develop antisocial personality (males) or somatization disorder (females). As a result of their findings, they contended that these three conditions are inter-related as opposed to distinct entities. Hamburger and colleagues (1996) also found support for gender as a moderator for the psychopathy-histrionic personality relationship. They hypothesized that psychopathy would manifest through either ASPD features or HPD features depending on biological gender and gender roles. Their hypothesis regarding biological gender was confirmed; they found that psychopathic females tended to exhibit HPD characteristics and psychopathic males tended to exhibit ASPD characterizes. This relationship was not found with gender roles. Limitations to their study include the use of an undergraduate college sample, which they stated may not have provided sufficient variance in ASPD and HPD features to detect significant moderator effects for the gender role hypothesis.

Essentially, the research findings have supported the notion that females and males manifest psychopathy differently. Preliminary evidence has suggested that the reason for this is related to underlying personality structure. Specifically, researchers have argued that there
is a traditionally narcissistic, grandiose personality structure for psychopathic males and a histrionic/hysterical personality organization for psychopathic female.

Assessment of Psychopathy

Similar to the efforts to conceptualize the psychopathic character, discussion regarding assessment has been controversial and complicated. Despite long-standing consensus about the core features of psychopathy, there has been less agreement about the best means of studying and assessing this syndrome (Vitale & Newman, 2008). Reasons for this certainly include the nature of the individuals being assessed—psychopathic individuals present of number of challenges related to the characteristics that define them. A historical overview of assessment of psychopathy has been well documented elsewhere and is beyond the scope of this review (see Cooke, Michie, & Hart, 2006; Lilienfeld & Fowler, 2006). For the purposes of this paper, a brief discussion of the PCL-R and self-report measures, and a more thorough examination of the literature on the PPI and the Rorschach Inkblot Method were most relevant.

The Psychopathy Checklist – Revised. The gold standard for the assessment of psychopathy is the PCL-R (Hare, 1991, 2003). This is considered to be the most widely accepted (Skeem et al., 2003) and the most important method of measuring psychopathy (Gacono et al., 2001; Meloy & Gacono, 2000). The first version of this measure (Hare, 1980) was developed to assess psychopathy in an incarcerated male population, in accordance with the psychopathic prototype as defined by Cleckley (Harpur et al., 1989). The PCL-R assesses interpersonal, affective, and behavioral features of psychopathy largely based on Cleckley’s conceptualization. As suggested by Hare (2003), a score of 30 or more on the PCL-R reflects a person in the high psychopathic range. The validity of the PCL-R is well-established
although some researchers have reported results that are not consistent with the two-factor model. Cunliffe & Gacono (2005) provided a summary of studies that have examined the validity of the PCL-R. They noted a number of shortcomings in these studies, particularly those with a female inmate population, such as the researchers lowering the PCL-R cut-off score and regarding ASPD and psychopathy as synonymous. Despite the prominent status and wide acceptance of the PCL-R, it also has disadvantages. These include the length of time needed for each administration, an extensive case file review, and the requirement that the examiner has specialized training.

**Self-Report Measures.** The alternative to using the PCL-R is utilizing one of a number of self-report measures. There are numerous advantages of using self-report assessment measures, such as economy and practicality, but the self-report method also presents important challenges (Lilienfeld & Fowler, 2006; Loving & Lee, 2006). Specifically, dishonesty is a central characteristic of a psychopathic individual, which begs the question of how an assessor could rely on such a person to provide an honest self-report. In addition, poor insight is another core aspect of this syndrome, as defined by Cleckley, such that psychopathic individuals lack awareness of the nature and extent of their problems. Furthermore, because psychopaths by definition do not experience certain affective states, they might not able to report on them (Lilienfeld & Fowler, 2006). However, despite these potential drawbacks, Lilienfeld and Fowler asserted that the self-report method should not be dismissed.

Perhaps the most researched self-report measure is the PPI/PPI-R. Other examples include the Psychopathic Checklist: Screening Version (PCL:SV, Hart, Cox, Hare, 1995) and the Levenson SRPS (Levenson et al., 1995). Some researchers have suggested that earlier
self-report measures of psychopathy tap into secondary psychopathy and neglect assessing the character traits of primary psychopathy (Benning, Patrick, Hicks, Blonigen, & Krueger, 2003; Harpur et al., 1989). This provided the impetus for Lilienfeld and Andrews (1996) to develop a self-report measure of psychopathy using a “pure” personality-based approach. Therefore, they set out to develop an assessment tool that measured the personality traits central to psychopathy and was grounded in Cleckley’s conceptualization.

_Psychopathic Personality Inventory_

Lilienfeld and Andrews (1996) used an exploratory approach of test development on a non-clinical, non-incarcerated sample. Results of preliminary studies conferred support for the construct validity of the PPI in a noncriminal population. The authors reported the PPI total score demonstrated good convergent validity with other measures of psychopathy, as well as to ASPD and to HPD to a lesser degree. The results also provided support to the importance of distinguishing between primary and secondary psychopathy (Harpur et al., 1989). In addition, Lilienfeld and Andrews reported gender differences for the PPI total score and all subscales, with males scoring significantly higher than females on the total score and five subscales (Machiavellian Egocentricity, Coldheartedness, Fearlessness, Impulsive Nonconformity, and Stress Immunity). They found no differences regarding factor structure. However, there may be more variance across gender with clinical and/or incarcerated samples (Lilienfeld, 1998).

Lilienfeld and Andrews (1996) recognized that their measure had limited generalizability due to the original sample with which it was constructed. Therefore, it has been important to determine if the PPI can be appropriately used with clinical and/or criminal populations. A review of the literature revealed seven published studies that have examined
the validity of the PPI on an incarcerated population. Several studies have demonstrated support for the construct and concurrent validity of the PPI with an incarcerated population (Berardino, Meloy, Sherman, Jacobs, 2005; Chapman, Gremore, & Farmer, 2003; Edens, Poythress, & Watkins, 2001; Patrick, Edens, Poythress, Lilienfeld, & Benning, 2006; Poythress, Edens, & Lilienfeld, 1998, Sandoval, Hancock, Poythress, Edens, & Lilienfeld 2000). However, most of these studies were limited to males (Edens, et al., 2001; Patrick, et al., 2006; Poythress, et al., 1998, Sandoval, et al., 2000; Verschuere, Crombez, Clercq, & Koster, 2005) with only two conducted with females (Berardino et al., 2005; Chapman et al., 2003).

Poythress and colleagues (1998) examined the PPI’s factor structure using a young adult male offender population. They found that the total PPI score had moderate to high correlations with the total PCL-R score \( r = .54, \ p < .001 \) and, perhaps more importantly, moderate and significant correlations with Factor 1 \( r = .54, \ p < .001 \). They contended that their results provided evidence that the inability for other self-report measures to correlate with psychopathy is not an inherent problem of the self-report method; instead, it may be due to poor content validity of the measure. However, the authors also found that only four of the PPI subscales (Machiavellian Egocentricity, Social Potency, Coldheartedness, and Impulsive Nonconformity) significantly correlated with the total PCL–R score. Benning et al. (2003), using a community sample, conducted a factor analysis of the PPI which revealed two consistent factors. They found that one factor reflects emotional-interpersonal aspects such as imperturbability, social dominance, and venturesomeness, and the second factor is characterized by social deviance, aggressiveness, and poor planning. The authors argued that these factors are marked by characteristics of the PCL-R’s Factor 1 and Factor 2 respectively.
Subsequent analyses of the PPI factor structure has had mixed results. For example, Berardino et al. (2005) did not replicate Benning’s factor structure, but it was replicated by Patrick et al. (2006). Patrick and colleagues have emphasized the importance of conceptualizing psychopathy as multi-faceted.

Chapman and colleagues (2003) examined the psychometric features of the PPI in a female inmate sample. Overall, they reported encouraging results regarding reliability, internal consistency, and the validity of the PPI total score. However, they also identified three weaknesses of the measure. First, they noted that total PPI scores continued to demonstrate significant associations with the response set scales (deviant responding, socially desirable impression management, and variable response inconsistency) even after the data of 15 participants were excluded based on deviant response patterns found on those scales. In other words, after locating and removing the data for the participants who produced deviant scores on any of the response set scales, the PPI total score for the remaining participants continued to demonstrate significant correlations with the three response set scales. As a result, the authors warned that PPI total scores may remain influenced by a bias or misrepresentation in responding. Second, the authors reported that the mean PPI total score was the same as the mean reported for an undergraduate female sample (Hamburger et al., 1996). Finally, they expressed concern that three of the subscales (Coldheartedness, Social Potency, and Stress Immunity) had nonsignificant or even negative correlations with the total score. They hypothesized that these constructs may assess something other than psychopathy in female inmates.

As noted previously, only two published studies have been conducted on the use of the PPI with incarcerated females. Therefore, information regarding the mean psychopathy
score for this population is limited. Chapman and colleagues (2003) reported that their entire sample \((N = 186)\) had a mean total PPI score of 368.71 \((SD = 48.34)\). When they removed data for the group of participants who demonstrated problematic response patterns the mean remained essentially unchanged \((n = 153, M = 367.32, SD = 48.31)\). Berardino and colleagues (2005) conducted a study to examine the construct validity of the PPI in an incarcerated female population \((N = 102)\). They found a mean PPI total score of 381.59 \((SD = 40.29)\), which is higher compared to Chapman et al. (2003).

Two groups of researchers have examined the ability of the PPI to discriminate between psychopaths and non-psychopaths (as defined by the PCL-R), but more studies in this area are needed. The overall classification accuracy rate was reported at 86% (Poythress et al., 1998) and 87% (Berardino et al., 2005). In both studies the sensitivity rate was much smaller than the specificity rate (e.g. 28.6% and 96.6% respectively, Berardino et al., 2005), indicating that PPI appears to be better at ruling out psychopathy as opposed to detecting it. Despite this, Poythress and colleagues concluded “…the PPI, unlike most existing questionnaire measures, may be useful in the differential diagnosis of psychopathy in offender samples and other samples characterized by high levels of antisocial behavior” (p. 429). Although they have stated that the PPI may have some utility in identifying individuals with psychopathic features they recommended further research. Limitations of both studies include small sample sizes.

*Rorschach Inkblot Method*

The Rorschach Inkblot Method is one of the most widely used psychological measures in clinical practice (Cunliffe & Gacono, 2005; Gacono, Evans, & Vigloine, 2002; Nieberding, Moore, & Dematatis 2002). There is a substantial body of evidence for the
reliability and the validity of the Rorschach as a personality assessment method (see Gacono et al., 2002; Vigloine & Hilsenroth, 2001 for a review). The Comprehensive System (Exner, 2003) is the most widely used and most acceptable method to administer, score, and interpret the Rorschach and it has received the most empirical attention. Other psychoanalytically-informed methods frequently have been used by leading Rorschach investigators in order to complement the Comprehensive System (Meloy & Gacono, 2000). These methods include Cooper & Arnow’s (1986) measure of defenses and Kwawer’s (1980) measure of object relations.

The Rorschach provides a wealth of information about the psychological functioning of an individual, such as level of character organization, defenses, coping style, affective states, reality testing, interpersonal skills, object relations, self-perception, and availability and effectiveness of psychological resources. In this sense, the Rorschach profile communicates a great deal about a person’s capacity in everyday functioning (Nieberding et al., 2002). Overall, the Rorschach contributes to understanding psychopathy from a personality-based approach, by examining the inner structure and dynamics of the psychopathic individual.

Despite the Rorschach’s common use and foundation of empirical support, it is not without substantial controversy. A review of the literature revealed a heated debate about the merits, validity, and utility of the Rorschach (notably, see Garb, Wood, Lilienfeld, & Nezworski, 2005; Lilienfeld, Wood, Garb, 2000; Weiner, 1998, 2001; Wood, Nezworski, Garb, 2003). The majority of their arguments can be traced to the proper use of the Rorschach. Critics have argued that the Rorschach is not valid because it does not consistently correlate with DSM diagnostic categories. The Rorschach may aid in diagnosis
and classification, but it was created to be a personality assessment tool with a central use of identifying personality strengths and weakness (Weiner, 2000). Furthermore, proponents of the Rorschach in the assessment of personality disorders do not purport that this measure should be used in DSM diagnosis (Huprich & Ganellen, 2006).

Gacono and colleagues (2001) have provided a thorough description of the theoretical and methodological issues concerning the relationship between Rorschach and psychopathy. Notably, the authors emphasized that personality assessment is not congruent with diagnosis and asserted that one Rorschach variable should never be used in isolation to diagnose psychopathy or determine the presence of psychopathic characteristics. In addition, the Rorschach should be used as a supplementary tool in the assessment of psychopathy (Meloy & Gacono, 2000). Specifically, the Rorschach “adds to and refines hypotheses generated by the PCL-R” (Gacono, 1998, p. 52). It is neither advisable nor valid to use the Rorschach as the sole instrument. However, the Rorschach is a valuable diagnostic aid for a variety of reasons. For example, it is not as face valid as other measures and therefore is not easily malingered (Meloy & Gacono, 2000). This is particularly important in the assessment of forensic and incarcerated populations. Also, the Rorschach can be constructively used as part of a psychoanalytically-informed approach, particularly to measure defenses and object relations (Gacono, 1990; for a more comprehensive discussion, see Gacono & Meloy, 1992a, 1992b).

Researchers have provided considerable evidence for the Rorschach’s validity in the assessment of psychopathy (Gacono, 1990; Gacono & Meloy, 1991, 1992a, 1992b; Gacono et al., 1990; Gacono et al., 2001; Meloy & Gacono, 2000). Specifically, there is evidence in support of the Rorschach’s ability to differentiate between a psychopathic and a non-
psychopathic individual as well as discriminate between severe psychopathy and moderate psychopathy. It is important to note that in most of these studies the researchers compared a high/severe psychopathy group to a low/moderate psychopathy group, with all participants meeting criteria for ASPD. This could affect the generalizability of the results, in terms of limiting the conclusions to a psychopathic population with comorbid ASPD. However, the fact that the researchers found different results for the severe psychopathy ASPD group and the moderate psychopathy ASPD group is notable because it portrays the heterogeneity of the ASPD diagnosis.

To date, there is a paucity of published studies of the Rorschach with a female population. Furthermore, only one study (Cunliffe & Gacono, 2005) has explored the Rorschach profile of female psychopaths (as identified by PCL-R ≥ 30) from an inmate population. Females have been included in other Rorschach studies, but the participants were neither psychopaths nor inmates (e.g. Gacono & Meloy, 1992a; Hartman, Norbech, & Gronnerod, 2006) or the format was a single participant case study (e.g. Gacono & Meloy, 1994).

The Relationship Between Rorschach Variables and Psychopathy

Meloy (1988) provided the most thorough description of how psychopathic individuals respond to the Rorschach, including numerical values for each variable that he has maintained is meaningfully related to psychopathy. The variables relevant to this paper are the following: Fr+rF (reflections), 3r+(2)/R (egocentricity index), V (vista), MOR (morbid response content), T (texture), FD (form dimension), COP (cooperative movement), and AG (aggressive movement). Considering that, historically, males have been almost exclusively studied it was assumed that the psychopathic profile developed by Meloy was
based on experience with a male population. Therefore, it remains to be determined whether these variables and their corresponding expected scores are applicable with females.

The vista (V) response reflects a painful, negative experience that results from introspection. Although a profile with zero V responses is common in normal populations, Meloy (1988) suggested that the presence of a V response is contradictory to a psychopathic disturbance due to their grandiose self-structure and the absence of motivation to be self-reflective. Therefore, the V response is expected to be absent in the psychopathic protocol. The exception to this is a psychopathic individual who is experiencing a dysphoric or depressive state as a result of an external punishment (e.g. being “caught”). The form dimension (FD) response also reflects an introspective process but communicates more about psychological mindedness. Meloy hypothesized that a psychopathic profile also will be absent of FD responses. This suggests a lack of psychological insight due to a psychopath’s primitive defense mechanisms, such as splitting and denial.

A response with morbid content (MOR) signifies a sense of self that is damaged or negative. Meloy (1988) argued that the MOR score is expected to be zero in psychopathic individuals. However, he noted that if a MOR response is present it can indicate a failure in defensive functioning, or, if is it paired with an aggression response, it can suggest the person is identifying with the aggressor as opposed to the victim within the response. The egocentricity index \((3R+(2)/R)\) and number of reflection responses \((Fr+rF)\) communicate the amount of self-focus and self-concern as well as the tone of this process. Meloy stated that at least one reflection response and an egocentricity index of \(> 0.45\) are expected in psychopathic profiles. This indicates an intensely narcissistic and self-focused individual and with a grandiose self-structure.
Aggressive movement (AG) and cooperative movement (COP) responses portray how one views interpersonal relationships. Aggressive responses reflect an increased likelihood of verbal and nonverbal aggression and portray how the person predicts interpersonal interactions. Meloy and colleagues have stated that the primary mode of relating for a psychopathic individual is an aggressive style with sadomasochistic features (Meloy & Gacono, 1992). Meloy (1988) has hypothesized that at least one AG response is typical in a protocol but emphasized that due to the face validity of such a response, a psychopath of average intelligence may suppress and not verbalize the aggressive association to the Rorschach. A COP response, on the other hand, reveals an expectation of cooperative human interactions. Finally, the texture (T) variable reflects a need for interpersonal relationships and the affective experience of having dependency needs. Meloy stated that psychopaths will not produce any T responses, which signifies an absence of desire or need for interpersonal contact or emotional connection.

A number of Rorschach variables have been studied with a male ASPD and/or psychopathy population. These include reflections, pairs, personalized responses, impressionistic responses, T, V, Y, and the egocentricity index (Gacono, 1990; Gacono & Meloy, 1991, 1992a, 1992b; Gacono et al., 1990). The AG response has not been examined by researchers, with the exception of Meloy & Gacono’s (1992) research on the development of additional aggressive responses. Perhaps this is due Meloy’s caution regarding the face validity of this response. In general, the Rorschach profile of psychopathic males is consistent with the presence of a grandiose self-structure that defends against anxiety, an inability and lack of interest in forming attachments, and a severe and pathological form of
narcissism. The absence of anxiety has provided evidence in support of differentiating primary and secondary psychopathy (Gacono & Meloy, 1991).

Cunliffe & Gacono (2005) examined Rorschach protocols of psychopathic (PCL-R ≥ 30) and non-psychopathic (PCL-R ≤ 24) female inmates on Rorschach measures of self-perception, interpersonal relatedness, and reality testing. The variables for these constructs were as follows: self-perception: reflections (self-focus), PER (defensiveness, aggrandizement), pairs, MOR (sense of self-damage), V (painful rumination), and FD (psychological mindedness); interpersonal relatedness: T (affectional relatedness), COP (expectations of cooperative human interactions), Fd (neediness); reality testing: X – % (reality testing), and X + % (perceptual accuracy). Overall, results indicated that female psychopaths differ significantly from their non-psychopathic counterparts. Specifically, psychopathic females experienced marked disturbances in self-perception, reality testing, and interpersonal relationships. A few of their findings were noteworthy and warranted further discussion.

First, in Cunliffe and Gacono’s (2005) study, female psychopaths produced elevated egocentricity indexes without reflection responses. The authors hypothesized that these females display an excessive level of self-focus, but they also experience displeasure and distress with this process (as evidenced by low reflections and V > 0). This finding differentiates them from their psychopathic male counterparts. The authors emphasized that this type of profile (high egocentricity index, no reflections, and elevated V) reflected a chronic self-criticism as opposed to remorse or guilt. Similarly, the authors reported a similar number of reflection responses between groups, which they argued suggests that female psychopaths lack the grandiose self-structure that underlies the male psychopathic character.
The presence of vista responses in Cunliffe and Gacono’s (2005) group of psychopathic females differentiates them from their male counterparts and Meloy’s (1988) psychopathy Rorschach profile. The authors found that although the mean score of V was not different between the psychopathic and the non-psychopathic groups, the psychopathic groups produced significantly more profiles with V greater than 1. This finding, along with other related variables, is suggestive of greater disturbances in self-perception, dysphoric affect, and poor self-regard. Meloy has argued that a psychopathic Rorschach profile should be absent of vista responses, due to the presence of grandiose self-structure. The V and FD response both assess the process of introspection, but FD pertains more to psychological mindfulness. Cunliffe and Gacono found that psychopathic females produced fewer FD responses than non-psychopathic females. This finding is consistent with Meloy’s statement that psychopathic individuals have impaired psychological mindedness, and therefore would not produce a FD response.

Finally, even though certain variables had similar frequencies between groups, psychopathic females had more “spoiled” (poor form quality) and part-object responses, with COP and T in particular. This is particularly interesting as it highlights “the tenuousness of a pattern reliant on others to regulate self-esteem and mood” (Cunliffe & Gacono, 2005, p. 540). Although it was a relationship that only approached significance, the authors noted that the psychopathic groups produced more COP responses than the non-psychopathic group. In general, they concluded that the psychopathic females demonstrated more interpersonal interest than their male counterparts, but they also demonstrated an impaired capacity for this relatedness. They hypothesized that their interest in others was based on need to be center of attention and to serve as a distraction from a painful internal experience of self.
Essentially, the very small amount of research on assessing psychopathic females with the Rorschach has produced results that are consistent with the notion that female psychopaths have an underlying histrionic/hysteric character structure. These results thus contributed to the developing body of evidence for salient gender differences in psychopathy. Although this area is still in its infancy, there appears to be a movement towards developing a Rorschach profile for psychopathic women, so that researchers do not need to rely upon findings conducted with an exclusively male population.

Current Study

Statement of the Problem

In all, despite the current debate regarding etiology, boundaries, and appropriate taxonomy, there appears to be consensus about the core affects, interpersonal style, and behaviors of the psychopathic individual (Hare, 2006). Despite the development of a more precise and empirically-supported definition and conceptualization of psychopathy, controversy and confusion about this syndrome has remained (Gacono, 2000).

Through a review of the literature I identified four neglected areas of research. First, there is a dearth of literature on the psychopathic female. Although evidence has suggested that males and females are organized at the same level of functioning (borderline) and may display similar behaviors, their characterological style is likely different (Cunliffe & Gacono, 2005). Specifically, female psychopaths have been found to exhibit a hysteric or histrionic personality structure while males display a characterologically narcissistic structure (Cunliffe & Gacono, 2005; Gacono & Meloy, 1994). Thus, psychopathic females have demonstrated a
more negative, dysphoric sense of self and have appeared to be more interested in others, despite their impaired capacity for interpersonal relatedness. If additional evidence suggests that female psychopaths are organized differently than males in terms of character structure, this would likely have significant implications in terms of assessment as well as treatment.

Second, although the original PPI was developed over a decade ago, more research is needed to help validate this measure, particularly on incarcerated populations. As noted previously, only seven validation studies have been conducted with an inmate population. Furthermore, just two of these studies included female participants. In addition, researchers that have examined the construct and convergent validity of the PPI have utilized the PCL. Therefore, the utilization of the PPI in conjunction the Rorschach would contribute novel and useful information to this area.

Third, concerning the use of the Rorschach, past researchers have relied heavily on the use of the PCL-R in order to identify people with psychopathy. For the study of psychopathy with an incarcerated population, the PCL-R has been used exclusively. Therefore, it would be valuable to examine how the Rorschach compares with other measures of psychopathy, particularly a method that is a more pure measure of the psychopathic personality.

Finally, a review of the literature revealed a productive debate regarding how to conceptualize the psychopathy; in other words, the personality-based versus behavior-based approach and the categorical versus dimensional approach. As discussed, most self-report measures of psychopathy have assessed the secondary psychopathy construct at the expense of the primary psychopathy construct. With more evidence suggesting that the essence of psychopathy may be best captured according to character structure, there is a need for a well-
validated personality-based self-report measure. The use of a “pure” personality based
assessment tool would provide valuable information on the conceptualization of
psychopathy.

Purpose of the Study

The purpose of this study was to compare theoretically relevant Rorschach variables
to a self-report, personality-based measure of psychopathy, with the aim of furthering the
understanding of how psychopathy is manifested in an incarcerated female population.
Psychoanalytic and psychodynamic theories regarding personality organization and character
structure were utilized to further understand the psychopathy personality, predominantly
using the work of Meloy and Gacono. In addition, the “psychostructural” (Exner, 2003) and
psychodynamic approach that was outlined by these authors (Gacono & Meloy, 1994) was
utilized. The purpose of this study was not to examine the ability of either measure to
diagnose psychopathy or discriminate psychopaths from non-psychopaths, but to understand
the personality construct that drives psychopathic behavior. Unlike other measures such as
the PCL-R, both the Rorschach and the PPI/PPI-R have been used and/or developed for this
purpose (Gacono et al., 2001; Lilienfeld & Andrews, 1996; Lilienfeld & Widows, 2005).

For this study I assumed the dimensional, personality-based approach and this
theoretically provided the foundation for my hypotheses, goals, and methods. Earlier
researchers, particularly in forensic settings, have conceptualized and operationalized
psychopathy in terms of the presence of various antisocial behaviors. Subsequently,
researchers (e.g. Lilienfeld & Andrews, 1996) have called for movement towards a
personality-based framework in order to capture the heart of the psychopathic construct and
return to Cleckley’s original conceptualization. The Rorschach Inkblot Method has been
described as a “personality-assessment instrument designed and intended to measure aspects of personality structure and dynamics” (Weiner, 2000, p. 435). Conceptually, the combination of the Rorschach and the PPI-R would likely provide comprehensive and fruitful information concerning the psychopathic personality.

The primary goals of this study were to: (a) to lend further support to Meloy & Gacono’s (1994) hypothesis that psychopathic females can be best conceptualized according to the histrionic/hysteric character style, (b) add to the development of a Rorschach profile for psychopathic females and (c) for the first time, address a neglected area of research by examining the Rorschach with a self-report measure of psychopathy. These goals were influenced by prior research but these hypotheses have never been tested according to this method.

The hypotheses for this study involved the relationship between the Rorschach and the PPI-R. Although the PPI-R and the Rorschach had never been studied in conjunction with each other, I hypothesized that select Rorschach variables that are theoretically and empirically related to psychopathy (as informed by Cunliffe & Gacono, 2005 and Meloy, 1988) would predict the level of psychopathy based on the PPI-R global score. The Rorschach variables that were selected assess self-perception (Fr+rF, egocentricity index, Sum V, FD, and MOR) and interpersonal relationships (T, COP, and AG). The self-perception and interpersonal relationships clusters were selected due to their general theoretical relevance to the histrionic/hysteric psychopathic female, but also because there is evidence that these two areas can help explain the potential different manifestations of psychopathy between males and females (Cunliffe & Gacono, 2005). Therefore, these
aspects of functioning and experience were believed to be salient in understanding the psychopathic female in particular.

As described previously, there have been a number of studies that have examined Rorschach profiles of psychopathic individuals as compared to the profiles of the normal population. Meloy and Gacono in particular have created a substantial body of knowledge regarding the psychopathic profile. A subset of this research is dedicated to psychopathic females, but this still the vast minority. Therefore, I took the psychopathy constructs generated by Meloy and Gacono and investigated them with an incarcerated female population. Specifically, the findings from Cunliffe & Gacono’s (2005) study helped inform my hypotheses.

**Hypothesis 1: Relationship between psychopathy and Rorschach self-perception variables.** I hypothesized that the level of psychopathy would be related to the level of disturbance in self-perception as measured by the following variables: egocentricity index, \( Fr+rF \), \( V \), \( MOR \), and \( FD \). Specifically, an increase in value of egocentricity index, \( V \), and \( MOR \) would be correlated with an increase in the global psychopathy score. Furthermore, fewer \( Fr+rF \) and fewer \( FD \) would be correlated with an increase in the psychopathy score. The rationale for this hypothesis stems from the notion that females with psychopathy experience themselves as damaged (MOR), experience a greater amount of negative affect (V), and demonstrate a limited capacity for introspection and psychological mindedness (fewer FD) (Cunliffe & Gacono, 2005). In addition, Cunliffe and Gacono (2005) found that psychopathic females, when compared to non-psychopathic females, tended to engage in excessive self-focus (high egocentricity index) but this was accompanied by a sense of displeasure and distress while doing so (low reflections).
Hypothesis 2: Relationship between psychopathy and Rorschach interpersonal relationships variables. I hypothesized that the level of psychopathy would be related to the following interpersonal relationships variables: T, COP, and AG. Specifically, I hypothesized that an increase in both COP and AG would be correlated with a higher global score of psychopathy.

The rationale for the increase in COP responses was based on the proposed hysterical/histrionic character in conceptualizing female psychopathy as well Cunliffe and Gacono’s (2005) research findings. Cunliffe and Gacono found a trend between psychopathy and increase in COP responses, although this finding was non-significant. However, they also found that the psychopathic group produced significantly more spoiled COP responses than the non-psychopathic group. They suggested that their findings as a whole were a reflection of the psychopathic female’s interest in others based on a need to be the center of attention (as opposed to a desire for relatedness and intimacy). Therefore, it was expected that psychopathic females in this study would follow this trend.

The AG variable has not been specifically explored in previous studies of psychopathic women, but it was hypothesized that an increase in AG would be related to an increase in global psychopathy score. The rationale for this was informed by the notion that female psychopaths are more relational than their male counterparts, and that cooperative and aggressive interactions could theoretically co-occur in order to meet the needs of a psychopathic female. This departs from Meloy’s (1988) assertion that psychopathic individuals typically do not provide aggression associations to the Rorschach. His rationale for this argument is that the AG response is too face valid and because overt, psychopathic aggression is egosyntonic, such that it is easily censored. However, if females and males are
hypothesized to differ in terms of personality or character structure, than the hysteric/histrionic character of females might not regulate aggression in the same manner.

Finally, I hypothesized that a decrease in T would be correlated with an increase in the global psychopathy score. The rationale for this hypothesis is Meloy’s (1988) description of the T response and its absence in antisocial/psychopathic protocols. Overall, it was expected that psychopathic females would be less interested in interpersonal connection and intimacy (T) but would still desire cooperative interactions (COP). This would highlight the superficiality of their interpersonal relationships, and suggest that they are still dysfunctional because they are not capable and/or interested in maintaining a deeper connection.

Hypothesis 3. Relationship between psychopathy and Rorschach composite score.

One of the objectives of this study was to add to the development of a Rorschach profile for psychopathic females, by identifying Rorschach variables that have a significant relationship with a global measure of psychopathy. Therefore, I created a Rorschach composite score of the variables. First, the value for Rorschach variable was translated into a standard score. Specifically, z-scores for each variable were calculated. For the three Rorschach variables that were hypothesized to have a negative relationship with psychopathy (FD, T, and reflections), the direction of the z-score value was reversed. Then the z-scores for each variable were summed to create the composite score. I hypothesized that the Rorschach composite score would demonstrate a significant, positive relationship with the psychopathy global score. In other words, I hypothesized that an increase in the composite score would be correlated with an increase in the global psychopathy score.

The rationale for the development of the Rorschach composite score is the notion that Rorschach variables should not be considered in isolation (Gacono et al., 2001). In other
words, Rorschach variables are valid and more meaningful when they are considered in context of each other. For example, the T variable is hypothesized to be absent in antisocial and psychopathic protocols (Meloy, 1988), but in a generally antisocial sample (such as with inmates), a correlational design might not capture the absence of T as being significant for psychopathy because there is not enough variance. Even though there is not a significant relationship, a T-less protocol might still be a defining feature of a psychopathic profile. Therefore, one variable, such as T, might need to be considered in the presence of other variables to signify psychopathy.
METHOD

Participants

The sample for this study comprised of 77 incarcerated females recruited from the Coffee Creek Correctional Facility, a state minimum and medium security facility in the Oregon Department of Corrections. All women inmates had been adjudicated and were serving their sentences. The crimes committed by women in this facility included a range of felony convictions, including personal, property, and status crimes. Participants were excluded if they were not fluent in the English language and/or if they had impaired intellectual or cognitive functioning. This was determined by consulting with the psychology staff. Participants were not excluded on the basis of mental illness or DSM diagnoses alone, but they were excluded if they were believed to be too emotionally unstable to participate.

Initially, only females who were housed in the general population of the medium security facility were considered for participation. A small group of participants were transferred to the minimum security facility after the study began and therefore completed the study in the minimum facility. In addition, female inmates housed in the Disciplinary Segregation Unit (DSU) and the Intensive Management Unit (IMU) also were included in the pool of participants after the study began for two reasons. First, some inmates initially housed in general population were transferred to the DSU/IMU facility. Also, inmates in the DSU and IMU were included in the interest of obtaining a more diverse sample in terms of psychopathic and/or antisocial traits.
Approximately 140 women were approached for study participation. Of this, approximately 50-60 refused to participate for unknown reasons. Therefore, a total of 82 women initially volunteered for the study. Five (6%) of these individuals withdrew during the second round of testing prior to Rorschach administration. Reasons for withdrawal included a high level of emotional instability \( (n = 2) \), parole \( (n = 1) \), and not wishing to continue participation \( (n = 2) \).

The final sample \( (N = 77) \) ranged in age from 18 to 62 years with the average age of 32.25 years \( (SD = 10.59) \). The racial/ethnic composition of the sample was as follows: 66% Caucasian/Euro-American \( (n = 51) \), 7% Black/African-American \( (n = 5) \), 4% Hispanic \( (n = 3) \), 9% Native American \( (n = 7) \), and 14% Bi-/Multi-racial \( (n = 11) \). Information about age and race/ethnicity was obtained via self-report. The racial/ethnic composition of this sample departed somewhat from the Oregon Department of Corrections demographic data for female prisoners. The racial composition of the overall female prison population, as of December 2008, was as follows: 82.7% Caucasian, 7.9% Black/African-American, 4.1% Native American, 3.7% Hispanic, and 1.6% Asian (Oregon Department of Corrections, 2008). Therefore, the sample in this study contained a more racially and ethnically diverse group of inmates.

All participants were assigned an Index Offense code that categorized the type of crime for which they were convicted. This data was obtained from each inmate’s file. The Index Offense code assigned for the purpose of this study reflected the most serious offense for this incarceration event. There were three types of offense: Person, Property, and Status. Person crimes for this sample included manslaughter, murder, aggravated murder, kidnapping, robbery, assault, and sex crimes. Property crimes included identity theft,
burglary, arson, unauthorized use of vehicle, and theft. Status offenses for this sample included delivery of drugs, possession of drugs, failure to appear, and criminal mistreatment. Of the total sample ($N = 77$), 58 were incarcerated for Person crimes (75.3%), 12 for Property crimes (15.6%), and 7 for Status crimes (9.1%). Regarding the Person crimes, 23 participants (30% of total sample) were serving a sentence for a murder or manslaughter offense (aggravated murder: $n = 2$, aggravated murder attempt: $n = 1$, murder: $n = 14$, and murder attempt: $n = 1$, and manslaughter: $n = 5$). This percentage of murder offenses is notably greater than the percentage of murder offenses found in the overall female inmate population, which was reported to be 11.8% (Oregon Department of Corrections, 2008). Of the total sample, 11 participants (14.3%) were serving a life sentence for a murder or aggravated murder offense, and, of the 11, 1 participant was serving a natural life (no parole) sentence for murder.

Data on participant level of education and marital status was not available. The primary investigator did not ask the participants to self-report this information during the study because the plan was to obtain this information through the inmate’s file. However, data on these two variables were sparse and inconsistent across the inmates’ records. Specifically, information for these areas is asked at intake in a voluntary self-report survey. No participant chose to provide information about her level of education. Also, information on marital status was sparse and inconsistent, particularly because this status frequently changes during the course of the inmate’s incarceration.

**Measures**

*The Psychopathic Personality Inventory-Revised (PPI-R).* The PPI-R (Lilienfeld & Widows, 2005) is a 187-item, self-report measure that was designed with the intention to
assess psychopathy as a personality construct. Each item is answered on a 4-point Likert-type scale with the options of False, Mostly False, Mostly True, and True. Items are coded on a 1 (False) to 4 (True) rating scale and scores are obtained by summing items after reversing items as specified. The test consists of a global (total) scale of psychopathy as well as eight factors or subscales. Factor 1, Machiavellian Egocentricity, consists of 30 items and assesses “narcissistic and ruthless attitudes in interpersonal functioning” (Edens et al., 2001, p. 406). Factor 2, Social Potency, consists of 24 items and measures the perceived ability to be charming and skillful at influencing others. Factor 3, Coldheartedness, consists of 21 items and assesses a propensity toward callousness, guiltlessness, and a lack of sentimentality. Factor 4, Carefree Nonplanfulness, consists of 20 items and is characterized by indifference about a lack of forethought. Factor 5, Fearlessness, consists of 19 items and assesses an absence of anticipatory anxiety in the face of harm and a willingness to engage in risk-taking behavior. Factor 6, Blame Externalization, consists of 18 items and measures the tendency to regard other people as the source of one’s problems. Factor 7, Impulsive Nonconformity, consists of 17 items and assesses “a reckless lack of concern regarding social mores” (Lilienfeld & Andrews, 1996, p. 496). Finally, Factor 8, Stress Immunity, consists of 11 items and measures a lack of manifest reactions to anxiety-provoking events.

Internal consistency for the global score and the subscales scores have been good across studies. In the preliminary studies for the development of the PPI, Lilienfeld and Andrews (1996) reported that the internal consistency (as assessed by Cronbach’s alpha) for the total PPI score among college students ranged from 0.90 to 0.93. In addition, the internal consistencies of the eight subscales ranged from 0.70 to 0.90, with 75% of the coefficients in the 0.80-0.90 range. Chapman et al. (2003), in their study with female inmates, reported
excellent internal consistency for the PPI total score ($\forall = 0.94$) and a range from 0.79 (Coldheartedness) to 0.89 (Fearlessness) for the subscales. However, the authors noted that these levels of internal consistency hold within the subscale and that subscale scores were not often adequately internally consistent (<0.40) with the total score.

*Rorschach Inkblot Method* (Rorschach, 1942). The Rorschach is a projective test that was developed by Hermann Rorschach in 1921. The test consists of 10 inkblot cards and the original cards are still in use today. The reliability and the validity of the Rorschach as a personality assessment method has been well established, and it is one of the most commonly used tests in clinical practice (Cunliffe & Gacono, 2005; Exner, 2003; Gacono et al., 2002; Nieberding et al., 2002; Viglione & Hilsenroth, 2001; Weiner, 1998; Meloy et al., 1997).

As other authors have done to prevent chance findings from multiple statistical comparisons (e.g. Hartman et al., 2006), the number of Rorschach variables examined was limited to eight. The selected variables are part of standard clinical interpretation and researchers have demonstrated that these variables are empirically relevant to the current study’s hypotheses (Cunliffe & Gacono, 2005; Gacono & Meloy, 1991, 1992a; Gacono et al., 1990). The following Rorschach variables were dependent variables in this study: Fr+rF, egocentricity index, Sum V, Sum T, FD, MOR, COP, and AG. A brief explanation of each of these variables is provided in Table 3.

For this study, the Rorschach was administered and scored using the Comprehensive System (Exner, 2003). Exner has recommended that brief protocols ($R < 14$) be excluded from study. Other authors, such as Meloy and Gacono exclude protocols with less than 12 responses. All Rorschach protocols in this study had a minimum of 14 total responses. All
<table>
<thead>
<tr>
<th>Variable Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reflections (Fr+rF)</td>
<td>Self-concern and self-value, narcissistic-like personality feature; when greater than zero, indicates exaggerated self-involvement and inflated self-worth</td>
</tr>
<tr>
<td>Egocentricity Index</td>
<td>Degree to which an individual is self-involved; estimate of self-concern and possibly self-esteem</td>
</tr>
<tr>
<td>Vista (Sum V)</td>
<td>A proclivity for self-examination but this introspection process engenders painful, negative emotions and experience</td>
</tr>
<tr>
<td>Form Dimension (FD)</td>
<td>Tendency for introspection and self-examination, capacity for psychological mindedness</td>
</tr>
<tr>
<td>Morbid content (MOR)</td>
<td>Indicates the presence of negative self-attributions, a flawed or damaged self-concept; a pessimistic view of the self</td>
</tr>
<tr>
<td>Texture (Sum T)</td>
<td>Represent a person’s need for closeness and the level of openness to close emotional relationships, dependency</td>
</tr>
<tr>
<td>Cooperative Movement (COP)</td>
<td>Convey expectation of positive, cooperative interpersonal interactions</td>
</tr>
<tr>
<td>Aggressive Movement (AG)</td>
<td>Convey expectation of aggressive, negative, and/or competitive interpersonal interactions</td>
</tr>
</tbody>
</table>

Rorschach protocols were scored by the primary investigator. A *Structural Summary* was generated for each protocol by using a computer program (Exner et al., 2008).

**Procedure**

This study was first approved by the Oregon Department of Corrections and then approved by the Institutional Review Board (IRB) at Pacific University in November 2007. Two methods were used to solicit volunteers: self-selection and identification by facility staff. First, a flier was posted in the facility to recruit volunteers for participation. No participants self-selected for participation in this manner. Second, the primary investigator asked two psychologists affiliated with the prison (who were both dissertation committee members) to create a list of inmates whom they believed display features of psychopathic...
and/or antisocial personality. After this list was created, the inmates in general population were scheduled according to their housing unit to meet with the primary investigator in groups of 7-10. After these meetings were underway, a small number of participants self-selected for participation at this time because they became interested in the study. In addition, the primary investigator met with the lieutenant who oversees the DSU and the IMU to identify inmates not housed in general population that would qualify for study participation.

The purpose of these two methods of recruitment was to help ensure diversity among participants. For example, it was believed that inmates on the more severe end of the psychopathy spectrum would not self-select to participate for a variety of reasons (e.g. lack of interest in increasing self-awareness, participation is not self-serving). Therefore, staff identification was necessary. A method of random selection was not utilized because the investigator wanted to ensure the presence of psychopathic and DSM Cluster B personality traits in the sample and because the purpose of the study was to explore the psychopathic personality on a dimension.

During the meeting with potential participants the primary investigator explained the purpose of the study and the criteria for participation. The potential participants were informed that participation is strictly voluntary and that their participation would not affect their treatment at CCCF in any manner. The limits to confidentiality were discussed. Specifically, they were informed that their results are confidential unless there is a positive indication on the Rorschach suicide index. The potential risks and benefits of participation were reviewed. Inmates who declined to participate were excused from the meeting and they returned to their housing unit or job. The consenting participants then signed an informed consent form. Participants were informed that they could obtain a general, plain language
summary of the results of this study; interested participants noted this on their informed consent form.

The procedure for participants housed in general population was as follows. Immediately after the informed consent forms were signed, participants were administered in the PPI-R. The primary investigator followed standard administration procedures for this measure. The primary investigator was present during the testing and participants were not allowed to converse with each other. After completion of the PPI-R the investigator informed the participants they would be scheduled for an individual meeting to complete the Rorschach. The participants received notice about when to meet with the investigator to take the Rorschach. The Rorschach tests were administered in private interview rooms.

The procedure for participants housed in DSU/IMU was slightly different. The primary investigator visited each inmate’s cell to determine interest in participation. After the inmate expressed interest, the inmate met with the primary investigator in a private meeting room. Here the primary investigator explained the purpose of the study and the criteria for participation and reviewed the informed consent form as outlined above. The participant was then administered the PPI-R while the primary investigator was in the room. After completion, the primary investigator administered the Rorschach. This procedure differed from that for general population because it was not appropriate or practical to review informed consent and administer the PPI-R in a group format. In addition, it was not practical to administer the Rorschach on a later date because of the procedure necessary for transferring the inmate from their cell to the meeting room.

Administration of all Rorschach tests was blind to the PPI-R scores in order to administer and score the Rorschach without bias. The primary investigator administered the
majority of the Rorschach tests \((n = 64)\). Two doctoral-level psychology students assisted with Rorschach administration by administering a total of 13 protocols. Each research assistant had completed sufficient coursework and received clinical supervision on the Rorschach Comprehensive System, and had previous experience with Rorschach administration and interpretation at CCCF. Each protocol administered by a research assistant was reviewed by the primary investigator to ensure proper administration. The primary investigator scored all Rorschach protocols and a primary supervisor reviewed a subset of the protocols to ensure scoring accuracy.
RESULTS

The purpose of this study was to compare theoretically relevant Rorschach variables to a self-report, personality-based measure of psychopathy, with the aim of furthering the understanding of how psychopathy is manifested in a female inmate population. The primary goals of this study were to: (a) to lend further support to the notion psychopathic females can be best conceptualized as having a histrionic/hysteric character style, (b) add to the development of a Rorschach profile for psychopathic females, and (c) address a neglected area of research by examining the Rorschach with a self-report measure of psychopathy.

I hypothesized that select Rorschach variables would predict the level of psychopathy based on the PPI-R total score. The Rorschach variables that were selected assess self-perception (Fr+rF, egocentricity index, Sum V, FD, and MOR) and interpersonal relationships (T, COP, and AG). I hypothesized that an increase psychopathy score would be related to an increase in value of egocentricity index, V, and MOR and a decrease in value of Fr+rF and FD. I hypothesized that an increased psychopathy score would be related to an increase in COP and AG and a decrease in T. As a whole, these findings would suggest an increased disturbance in self-perception and dysfunction in interpersonal relationships, and would lend support to the notion that psychopathic women demonstrate a histrionic/hysteric personality organization and character style.
**PPI-R Results**

The PPI-R total scores for the sample ($N = 77$) ranged from 204 to 415 with a mean of 290.06 and a standard deviation of 41.40.\(^4\) The mean score in this study was approximately 6.75 points higher than the mean of the male offender normative group ($M = 283.86$, $SD = 28.99$; Lilienfeld & Widows, 2005). In addition, the mean score of this sample was higher than the mean found in the community/college females normative groups. The mean psychopathy score for that group ranged from 276.75 in the 18-24 years age group to 249.17 in the 60+ years age group, with scores decreasing as age increased.

The PPI-R total score mean and standard deviation was calculated for each index offense group. The Property offense group demonstrated the highest PPI-R total score, with a mean of 307.58 ($SD = 36.68$). The Status offense group had a mean score of 293.86 ($SD = 28.73$). The Person offense group had the lowest PPI-R total score, with a mean of 285.98 ($SD = 43.07$).

A Pearson correlation was performed to examine the relationship between PPI total score and age. Results indicated that the psychopathy total score and age have a significant relationship ($r = -.44, p < .001$), suggesting that level of psychopathy decreases as age increases.

**Rorschach Results**

The means, standard deviations, and ranges for the Rorschach self-perception variables and interpersonal relationships variables are presented in Table 4. The Rorschach composite scores for the sample ($N = 77$) ranged from a minimum value of -4.35 to a maximum value of 8.19, with a mean of -.0072 and a standard deviation of 2.58.

---

\(^4\) The PPI-R scores of all participants who took the PPI-R ($N = 82$) also ranged from 204 to 415, with a slightly lower mean of 288.70 and standard deviation of 41.23.
A Pearson correlation was performed to examine the relationship between the total psychopathy score on the PPI-R and the eight Rorschach variables. The results from the correlational matrix are presented in Table 5.

Hypothesis 1: Relationship between psychopathy and Rorschach self-perception variables. Results revealed that only one Rorschach self-perception variable, FD, was significantly related to PPI-R total psychopathy score. FD was significantly and positively related to psychopathy score ($r = .31, p = .006$). Despite the fact that a significant relationship was hypothesized between FD and psychopathy score, a relationship found was in the opposite direction. The relationship between the PPI-R total psychopathy score and the self-perception variables of egocentricity index, Fr+rF, V and MOR were all nonsignificant; results for these correlations are presented in Table 5. These results were not consistent with

### Table 4.

*Descriptive Statistics for Rorschach Variables*

<table>
<thead>
<tr>
<th>Rorschach Variable</th>
<th>$M$</th>
<th>$SD$</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Self-perception</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FD</td>
<td>.57</td>
<td>.88</td>
<td>0-4</td>
</tr>
<tr>
<td>V</td>
<td>.47</td>
<td>.79</td>
<td>0-3</td>
</tr>
<tr>
<td>Egocentricity Index</td>
<td>.38</td>
<td>.20</td>
<td>0-1.20</td>
</tr>
<tr>
<td>Fr+rF</td>
<td>.61</td>
<td>1.07</td>
<td>0-5</td>
</tr>
<tr>
<td>MOR</td>
<td>1.05</td>
<td>1.56</td>
<td>0-7</td>
</tr>
<tr>
<td><strong>Interpersonal relationships</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>COP</td>
<td>1.26</td>
<td>1.21</td>
<td>0-5</td>
</tr>
<tr>
<td>AG</td>
<td>.52</td>
<td>.88</td>
<td>0-4</td>
</tr>
<tr>
<td>T</td>
<td>.31</td>
<td>.61</td>
<td>0-3</td>
</tr>
</tbody>
</table>
the hypotheses. Specifically, it was hypothesized that an increase in value of egocentricity index, V, and MOR would be related to an increase in psychopathy score and a decrease in Fr+rF would be related to an increase in the psychopathy score.

Hypothesis 2: Relationship between psychopathy and Rorschach interpersonal relationships variables. Results indicated that two Rorschach interpersonal relationships variables were significantly correlated with PPI-R total psychopathy score. The COP variable was the most strongly related to the total level of psychopathy of all Rorschach variables ($r = .39, p < .001$). The positive, significant relationship between these variables was consistent

<table>
<thead>
<tr>
<th>Table 5.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Intercorrelations Between Rorschach Variables and Psychopathy Score</strong></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>PPI Total</td>
</tr>
<tr>
<td>FD</td>
</tr>
<tr>
<td>AG</td>
</tr>
<tr>
<td>COP</td>
</tr>
<tr>
<td>MOR</td>
</tr>
<tr>
<td>V</td>
</tr>
<tr>
<td>T</td>
</tr>
<tr>
<td>Ego Index</td>
</tr>
<tr>
<td>Fr+rF</td>
</tr>
</tbody>
</table>

* $< .05$
** $< .01$
*** $< .001$
with the hypothesis. The AG variable also was found to demonstrate a positive, significant relationship with psychopathy score \( r = .24, p = .036 \); this correlation was also in the expected direction.

**Hypothesis 3: Relationship between psychopathy and Rorschach composite score.** A Pearson correlation was performed to examine the relationship between the total psychopathy score on the PPI-R and the Rorschach composite score. Results indicated that there was not a significant relationship between the Rorschach composite score and PPI-R psychopathy score \( r = .14, p = .12 \).

**Overall study objective: Development of a female psychopathy Rorschach profile.** A hierarchical regression analysis was performed to determine if Rorschach variables FD, COP, and AG improved prediction of PPI-R score beyond that afforded by age. Initial inspection of the correlation matrix indicated significant correlations between all predictor variables and PPI-R total score, as previously noted and shown in Table 5. In addition, there were statistically significant intercorrelations among all three predictor variables. However, tolerance values for each predictor ranged from .94 to .98, indicating multicollinearity should not be an issue and therefore the results appear interpretable. The other Rorschach variables \( V, \text{ egocentricity index, Fr+rF, MOR, and T} \) did not correlate with the PPI-R psychopathy score, thus, they were not included in the regression equation.

Age was entered in the regression model first, and it resulted in significant prediction of psychopathy score \( F = 18.05, p < .001, \text{ adj. } R^2 = .18 \). After adding the predictor variables of FD, AG, COP, not only did the regression equation show significant prediction \( F = 8.15, p < .001 \), the \( R^2 \) change was significant \( R^2 \text{ change} = .12, p = .01 \). Beta weights for the three additional predictors are shown in Table 7; only COP was significant. In sum, the Rorschach
variables FD, AG, and COP were significantly correlated with the PPI-R total psychopathy score. In addition, these variables significantly increased the prediction model of total psychopathy score when entered after age. In other words, the variables of FD, AG, and COP contribute to the prediction model above and beyond age, and therefore they should be retained in the model.

Table 6.

Summary of Hierarchical Regression Analysis for Rorschach Variables Predicting Psychopathy Score

<table>
<thead>
<tr>
<th>Variable</th>
<th>B</th>
<th>β</th>
<th>partial r</th>
<th>t</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>-1.32</td>
<td>-.34</td>
<td>-.36</td>
<td>-3.30</td>
<td>.002</td>
</tr>
<tr>
<td>Rorschach FD</td>
<td>7.96</td>
<td>.17</td>
<td>.19</td>
<td>1.64</td>
<td>.107</td>
</tr>
<tr>
<td>Rorschach AG</td>
<td>3.08</td>
<td>.07</td>
<td>.07</td>
<td>.62</td>
<td>.538</td>
</tr>
<tr>
<td>Rorschach COP</td>
<td>8.33</td>
<td>.24</td>
<td>.26</td>
<td>2.25</td>
<td>.027</td>
</tr>
</tbody>
</table>

Note. Values listed are for Step 2 of model. ΔR² = .12, p = .01 for Step 2.
The goal of this study was to contribute to the growing knowledge base about the characteristics of psychopathy in female offenders in order to further understand how the psychopathic personality might manifest differently across genders. This was accomplished by comparing theoretically relevant Rorschach variables to a self-report, personality-based measure of psychopathy. Incarcerated female offenders ($N = 77$) were administered the Rorschach Inkblot Method using Comprehensive System and the PPI-R. Certain Rorschach variables that represent self-perception and interpersonal relationships were selected in order to examine the notion that a histrionic/hysterical personality underlies female psychopathy.

**PPI Scores and Demographic Data**

The mean total psychopathy score on the PPI-R for this sample was 290.06 ($SD = 41.40$, range 204 to 415). It was difficult to determine with precision how the mean PPI-R score for the current study’s sample compares with the normative sample. During the development of the PPI-R there was not a female offender normative sample; instead norms were created for male and female community/college samples and for a male offender sample. Authors of the PPI-R found it necessary to develop separate norms based on gender, which was consistent with prior findings, including research on the original PPI, that males obtain significantly higher psychopathy total scores than females (Lilienfeld & Andrews, 1996; Lilienfeld & Widows, 2005). Hence, the creation of separate norms for community males and females, but unfortunately not for the incarcerated or offender sample.
The PPI-R total score mean for the incarcerated females in this study was approximately 6.75 points higher than the mean of the male offender normative group ($M = 283.86, SD = 28.99; Lilienfeld & Widows, 2005$). However, the race/ethnicity of the male normative sample ($N = 154$) was very different than the sample for this study, with 73% of their sample being African-American, 17% Caucasian, 6% Hispanic, and 4% Other. The range of age for the male offender sample was 18 to 57 years, with a mean age of 34.89, which is comparable to the age group for the current study (18 to 62 years with the average age of 32.25). Interestingly, Lilienfeld and Widows (2005) found that sociodemographic variables were not related to psychopathy score, but noted that these results could be explained by the fact that their sample was fairly homogenous.

The relationship between psychopathy and age has been considered in the literature (Berardino et al., 2005), and this supports theory regarding the maturational development of psychopathy. In this study, age and total psychopathy score were found to have a moderate, negative relationship ($r = -.44, p < .001$), suggesting that as a person increases in age her global level of psychopathy decreases. Again, Lilienfeld & Widows (2005) did not find a significant relationship between age and psychopathy in their male offender sample. However, they did find this relationship in both the male and the female community/college samples and thus they provided separate norms for psychopathy score based on six age groups. For community/college females, the mean psychopathy score ranged from 276.75 in the 18-24 years age group to 249.17 in the 60+ years age group, with scores decreasing as age increased. The mean score for the current study’s sample at 290.06 is thus higher than the score for the most psychopathic community age group. The mean scores for the
community/college females were consistently lower than their male counterparts for all age
groups.

Although it appears that the mean PPI-R total score for this sample was within
expectation according to the PPI-R normative statistics (Lilienfeld & Widows, 2005), the
mean for this sample was substantially lower (78 to 91 points lower) than the mean found in
the two other studies that examined the PPI with incarcerated females. The mean PPI total
psychopathy score for the sample in Berardino and colleagues’ (2005) study was 381.59 (SD
= 40.29) with a range of 266 to 495. In addition, the mean total psychopathy score in the
Chapman et al. (2003) study was 368.71 (SD = 48.34). The original PPI measure was used in
both of these studies; therefore it is possible that the use of the revised version of PPI in the
current study could explain some of the difference in mean scores. This seems very unlikely,
however. Essentially, the mean score of psychopathy in the Berardino et al. and the Chapman
et al. studies were substantially higher than the mean score in the present study, as well as the
mean score of the male offenders’ normative group. These findings departed from the notion
that males traditionally score higher than females on the PPI-R and other measures of
psychopathy.

In all, it was difficult to ascertain whether the level of psychopathy for the
participants of this study was within expectation, largely due to the absence of appropriate
norms and the discrepancy between the available norms and the results of other studies.
Granted, the use of the PPI/PPI-R with a female incarcerated population is still in its infancy.
Therefore, it appears that additional research is necessary in order resolve these
discrepancies. For the purpose of this study, the issue regarding the mean psychopathy score
should be considered when interpreting the results. For example, if the participants had
demonstrated an overall higher level of psychopathy then it is plausible that the relationship between the Rorschach variables and psychopathy score could have been strengthened.

**Hypothesis 1: Psychopathy and Self-perception**

First, I hypothesized that the level of psychopathy would be related to the level of disturbance in self-perception; specifically, an increase in global psychopathy score would be related to an increase in disturbance in self-perception. This relationship was not confirmed by the results in this study. This hypothesis was explored by examining the relationship between certain Rorschach variables (egocentricity index, Fr+rF, V, MOR, and FD) and the PPI-R total psychopathy score. Specifically, it was hypothesized that an increase in value of egocentricity index, V, and MOR would be correlated with an increase in the global psychopathy score. Furthermore, fewer reflections and fewer FD would be related to an increase in the psychopathy score. The main reasoning behind this hypothesis is the belief that psychopathic females perceive themselves more negatively than their male counterparts. This is related to the proposed hysteric/histrionic character that underlies female psychopathy. Specifically, it is believed that the hysteric/histrionic character does not fend off dysphoric affect and negative self-perception in the way that the predominantly narcissistic, grandiose character of male psychopaths functions to accomplish (Cunliffe & Gacano, 2005).

However, results indicated that one self-perception variable, FD, was significantly related to psychopathy score. The FD response reflects a capacity for psychological mindedness, which can be considered a type of introspective, self-perceptive process. The FD variable demonstrated a significant, positive relationship with psychopathy score ($r = .31$, $p = .006$), indicating that the number of FD responses increased as psychopathy level increased. This finding is the opposite of the hypothesis of this study and the opposite of
what has been theorized and empirically demonstrated in the literature. Meloy (1988) contended that a psychopathic profile will be absent of FD responses, and this reflects of a lack of psychological insight that is due to primitive defense mechanisms. In addition, Cunliffe and Gacono (2005) found that the female psychopathic group differed significantly from the non-psychopathic group by producing fewer FD responses. Similarly, they concluded this reflects a psychopathic female’s limited capacity for introspection. An explanation for this finding was not readily apparent, but a potential relationship between increased FD, along with increased AG and COP, has been considered in a subsequent section.

In addition, results indicated that level of psychopathy was not related to any other self-perception variable. Of these non-significant variables, the relationship, or lack thereof, between psychopathy and the reflection response is worth further discussion. It was hypothesized that the number of reflection responses and level of psychopathy would demonstrate a negative relationship; this hypothesis was not confirmed, as the relationship between the reflection response and psychopathy score was not significant. The rationale for this hypothesis was informed by Cunliffe and Gacono’s (2005) finding that the reflection response failed to differentiate the psychopathic and the non-psychopathic group, and that the psychopathic group produced a significantly higher egocentricity index without reflection responses. In this sense, the lack of a relationship between reflections and psychopathy in this study might indeed be consistent with prior research findings. Therefore, this result potentially lends support to the notion that psychopathic females lack the grandiose self-structure that operates in males. However, a limitation to this interpretation is the non-
significant relationship that was found between the egocentricity index value and psychopathy score.

Hypothesis 2: Psychopathy and Interpersonal Relationships

The next hypothesis was that a higher level of psychopathy also would be related to greater dysfunction or disruption in interpersonal relationships. This was investigated by examining the relationship between the psychopathy total score and the Rorschach interpersonal variables of T, COP, and AG. Specifically, it was hypothesized that an increase in COP and AG and a decrease in T would be associated with a higher global score of psychopathy. This hypothesis was partially confirmed by the results of this study.

The hypothesis for this study that an increase in COP responses would be associated with a higher level of psychopathy was confirmed. In fact, COP had the strongest relationship with psychopathy out of all Rorschach variables that were examined. The rationale for this hypothesis was grounded in the notion that it is a hysteric/histrionic character style that underlies the psychopathic female. The hypothesis also was informed by Cunliffe and Gacono’s (2005) finding of a non-significant trend in increased COP for psychopathic group and significantly more spoiled COP responses for the psychopathic group compared to the non-psychopathic group. They suggested that this finding was reflection of the psychopathic female’s interest in others based on a need to be the center of attention (as opposed to a desire for relatedness and intimacy). In all, this finding suggests that the behavior of psychopathic females tends to be more cooperative, in that they expect cooperative human interactions. An explanation of this finding is that psychopathic women do not function or work on their own; instead, they gather the cooperation of others. The goal of this behavior is not for intimacy or connectedness; instead, they engage in cooperative
behavior in order to achieve what they desire. In other words, their striving for cooperative behavior is entirely self-serving, and allows them to achieve power and dominance.

The hypothesis that an increase in AG responses would be related to an increase in psychopathy was confirmed in this study. As previously stated, the AG variable has not been explored in psychopathic women, and generally has not been studied in psychopathic men. This could be a result of Meloy’s (1988) assertion that the aggression response is too face valid, which allows the psychopathic individual to disregard his aggressive association to the Rorschach. In addition, it has been suggested that the egosyntonic nature of psychopathic aggression may lead to censoring (Meloy & Gacono, 1992). However, there was a clear relationship between aggression and psychopathy in the present study. This finding opens the possibility that aggression in psychopathic women may be more egodystonic, which would be an example of how females and males manifest psychopathy differently.

The hypothesis that a decrease in T responses would be related to an increase in psychopathy was not confirmed; instead, theses variables were not significantly related. The rationale for this hypothesis was Meloy’s (1988) description of the T response and its absence in antisocial/psychopathic protocols. Cunliffe and Gacono (2005) found that their psychopathic group produced significantly more T responses than their non-psychopathic group, and related this to an additional finding that the psychopathic group also produced significantly greater part-object T responses than the non-psychopathic group. They concluded that this result, in combination with other findings concerning interpersonal functioning, reflected the female psychopath’s preference for more frequent, superficial contact despite her significantly compromised ability to have meaningful interpersonal relationships. The lack of any relationship between the T response and psychopathy and this
study neither lends nor takes away support from this notion. An explanation for this non-significant finding is that this sample could be fairly homogenous in terms of antisocial traits, and therefore did not have enough variance in the T response to produce significant findings.

**Hypothesis 3: Psychopathy and Rorschach Composite Score**

It was hypothesized that the Rorschach Composite Score created for this study would demonstrate a significant, positive correlation with the PPI-R total psychopathy score. However, this hypothesis was not confirmed as these variables did not have a significant relationship. The rationale for this hypothesis was to prevent the Rorschach variables from being considered in isolation (Gacono et al., 2001) and to find a way to quantitatively capture the meaning of a cluster of Rorschach variables, thus developing a profile. Explanation for the nonsignificant results is that only three of the eight Rorschach variables demonstrated a significant relationship with psychopathy score. Therefore, it follows that the sum of these variables would not produce a significant relationship either.

**Overall Study Objective: Creation of Rorschach Profile**

The three variables that demonstrated a significant relationship with psychopathy were further examined in order to determine whether they could predict level of psychopathy. All three variables – COP, AG, and FD – were significantly related to each other, which suggested that they could be useful in creating a female psychopathic profile. In addition to these variables, age was significantly related to level of psychopathy. In fact, age and psychopathy demonstrated the highest correlation of any variable. Therefore, it was necessary to determine if these three Rorschach variables were able to predict level of psychopathy beyond that afforded by age. Results indicated that the variables of COP, AG,
and FD as a regression model were able to account for a significant portion of the variance above and beyond what was accounted for by age.

Despite the significance of the model as a whole, the beta weights for each variable indicated that only COP remained significant. Therefore, although the model was significantly related to psychopathy total score, only COP contributed significantly to the prediction model. In other words, the model would remain significant if AG and FD were removed from the prediction model. However, COP was significantly correlated with AG and FD. Therefore, it may be that the shared variance of COP with AG, and possibly FD, may have affected the beta weights value. In other words, COP likely took most of the AG variance out of the model. This is because COP was entered into the model first, as it was most strongly correlated with psychopathy score out of the three variables.

With COP, AG, and FD together in the model it was important to theoretically explore how these variables are related, in an effort to understand how these variables could contribute to the creation of a psychopathic female Rorschach profile. Results suggested that females higher in psychopathy demonstrated more cooperative and aggressive interaction responses. The presence of COP responses reflects the female’s need to be center of attention in order to be distracted from her painful internal experience of herself (Cunliffe & Gacono, 2005). In addition, as previously discussed, the purpose of cooperative interactions is likely to help the psychopathic female achieve what she desires in a self-serving manner, as opposed to achieve mutual connection and interrelatedness. In this sense, psychopathic females may need both cooperative and aggressive strategies and interactions to achieve such goals. Alternatively, the presence of increased AG with increased psychopathy may suggest that psychopathic females are more suspicious and/or fearful about being aggressed upon by
others. Therefore, the AG response could reflect a sense of paranoia, or a projection about the motivations of others. These types of fears are not uncommon in incarcerated populations, which could explain the significant relationship between psychopathy and AG in this sample. However, this does not preclude the existences of this relationship outside of prison populations. Instead, the prison experience likely enhances this relationship.

The way that the FD variable potentially fits into this picture has to do with a capacity for being psychologically mindful about these interpersonal interactions. Again, the FD response communicates more about psychological mindfulness rather than an introspective process alone. The increase in all of these variables with an increase in psychopathy suggests that psychopathic females might be more inclined to be more interpersonally aware (psychologically minded) in order to anticipate when these cooperative and/or aggression interactions might occur, whether they are the instigator of these actions or whether they are being acted upon. Furthermore, this cluster of variables could reflect the presence of paranoia, particularly with increased AG and FD together.

Conclusions

Overall, results revealed modest support for the notion that psychopathic females can be conceptualized according to a hysteric/histrionic character style, as specifically proposed by Meloy and Gacono (1994) and more recently supported by Cunliffe and Gacono (2005). The finding of increased COP and AG as the level of psychopathy increases suggests the presence of a more interpersonal orientation of psychopathic females. This was conceptualized as not having a greater interest in connection and intimacy, but rather it suggested that the psychopathic females utilized interpersonal relations to achieve their own needs. In addition, this lends some support to the notion of disturbance in interpersonal
relationships in psychopathic females. This was supported by the presence of AG in the profile. The presence of COP might contradict this at face value; however, COP could signal a disturbance when cooperative interactions are performed and/or expected in a detrimental manner. It is still plausible that interpersonal interest, as evidenced by COP in particular, could serve to bolster the self against a highly painful and negative self-experience as suggested by Cunliffe and Gacono (2005), but there was no evidence of disturbed self-perception found with this sample with these variables.

In general, females higher in psychopathy did not demonstrate a significantly higher disturbance in self-perception. However, the lack of relationship between psychopathy and the egocentricity index value and the number of reflection response might offer support to the notion that psychopathic females do not have the grandiose self-structure that operates in males, which protects their male counterparts from self-perception disturbance. It was not entirely clear how the increase of FD responses lends or takes away support from the hypothesis about disturbance in self-perception.

In addition to the relationship between the Rorschach variables and psychopathy, results suggested that the relationship between psychopathy and age is significant. Traditional conceptualization has dictated that psychopathic people tend to stabilize behaviorally as they age. The personality (Factor 1) piece is still present, but psychopathic individuals tend to not exhibit the same psychopathic behaviors. The PPI-R was purported to measure the interpersonal, personality, affective traits of psychopathy. Therefore, theoretically, the moderately strong correlation between age and psychopathy score found in the current study was not expected. In fact that PPI-R authors did not find a relationship between age and psychopathy score in the their male offender normative sample, although
they did in their community/college normative sample. Nevertheless, the findings in this study regarding age and psychopathy do challenge some notions of the PPI-R and/or how the test authors conceptualize of psychopathy. Essentially, the issue centers on whether there is measurement bias in the PPI-R or whether psychopathy as a whole (not just psychopathic behaviors and/or Factor 2) stabilizes over time. Furthermore, there is a possibility that psychopathy in females does decrease over time, which would be another differentiation from their male counterparts.

The notion of “successful” psychopathy might be relevant here. As a whole, the results did not suggest a substantial level of disturbance or deficit in psychopathic females. Could the women, at least in this study, be more successful in this sense? The FD response is related to this idea. For example, in order to be more successful interpersonally, they might also need to be more psychologically minded and/or more introspective. Alternatively, the FD response could suggest a sense of paranoia about their experiences and others. A hysteric/histrionic character structure might allow for this type of development, in terms of being more successful interpersonally in particular. On the other hand, the grandiose, narcissistic personality that has characterized psychopathic males might not allow for this type of interpersonal “success”.

The results of this study provided preliminary evidence in support of the notion that male and female manifestations of psychopathy have a number of important differences. The cooperative and psychologically minded aspects of the Rorschach profile could change the conceptualization of female psychopathy. In addition, aggressive and antisocial behavior may not be as overt with females. Instead, these acts may be more ego dystonic, may be masked by cooperative strivings, and they may have a more interpersonal manifestation. In this sense,
the psychopathic female may be more complex, not as clear-cut as their male counterparts. Ultimately, in keeping with Cleckley’s observation, psychopathic females could wear a different kind of mask.

**Clinical Implications**

In general, the results of this study suggested that psychopathic females demonstrate a more interpersonal orientation than psychopathic males, even though the interpersonal relationships are still colored by dysfunction and deficits. Nonetheless, the interpersonal nature of a female psychopath may affect the structure and nature clinical treatment. This is particularly relevant because the psychopathic population is notoriously difficult to treat. This relationship between psychopathy and the FD variable warrants further attention, because if psychopathic females are indeed more psychologically mindful than traditionally believed, the nature of clinical treatment should reflect this characteristic.

**Limitations of this Study**

The findings of this study have limitations that warrant attention. First, there are limitations about the characteristics of the sample and the way that participants were selected. Therefore, generalizability may be an issue. The participant population was comprised of adult females from a medium security prison in the state of Oregon. In addition to any geographic variables that might limit the results, the participant population was fairly homogenous in terms of race/ethnicity, as the sample was predominantly Caucasian/Euro-American. Despite these issues, participants were selected from the only women’s prison in the state, which could provide more diversity in the sample than a regional facility.

In addition, the results of this study may not generalize to the women across the Oregon prison system, and/or other prison systems. One reason for this is that women in the
minimum-security facility were not approached to participate. In addition, this sample contained a relatively high number of women who committed murder and Person offenses and therefore there were more violent offenders. An explanation for the significantly higher proportion of participants with a Person offense is that the sentences for these crimes are much longer. This would naturally keep this group in prison system for more time, allowing them to finish completion of this study but also allowing them to be more recognized by facility staff. Therefore, this was a more visible group of females to ask to participate.

Additional demographic variables that were not included in this study could have had a significant impact on the results. Although participants were not selected for this study if they were too behaviorally and/or emotionally unstable to participate, this was a subjective decision based on a staff psychologist’s knowledge. Participants were not excluded based on DSM-IV diagnosis alone. In addition, data was not collected for psychiatric illness or any mental health problems. Therefore, psychiatric conditions may exist within this sample that could affect the results of this study.

In addition, the manner in which participants were recruited may impact the generalizability of the results. The vast majority of the participants were identified by two staff psychologists. A lieutenant who oversees the DSU and IMU also assisted in the selection of participants. Therefore, the identification of participants was not random and there may have been potential bias built into this method of participant selection. Furthermore, the primary investigator initially met with relatively large groups (approximately 15 people) of potential participants. It became apparent that this allowed for social pressure to influence whether or not a person volunteered to participate. For example, if one or two social “leaders” refused to participate it appeared prevent any other member of
the group from feeling able to volunteer. Approximately 50-60 women refused to participate after these meetings; it is not certain that this social pressure or the group configuration was the exact reason for their refusal but it is a strong possibility. After two of these meetings, the primary investigator switched strategies to meet with smaller groups (6-7 people) and typically most every person volunteered at this time. In addition, it appeared that once information about the study spread throughout the correctional facility that more people were willing to volunteer their time.

Finally, the design of the study and the statistical analyses that were employed inherently limit how the results can be used and interpreted. The study had a correlational design and thus did not designate groups within the sample. In other words, the sample was not divided into groups according to level of psychopathy. The rationale for this, in part, was theory on conceptualizing psychopathy as a dimensional construct. In addition, the goal of the study was not diagnose psychopathy, but it was to understand how variables that were theoretically relevant to the psychopathic construct might manifest along a continuum. This study design does limit how the results can be applied and understood.

Strengths of this Study

One of the unique aspects of this study was that this was the first known time that the Rorschach was used to examine psychopathy in conjunction with a self-report psychopathy measure. All of the research studies reviewed utilized the PCL/PCL-R with the Rorschach. Not only did this study involved using a self-report measure, but the measure chosen, the PPI-R, was developed specifically for the purpose of assessing the personality traits and interpersonal/affective components of psychopathy. This is keeping with direction of the current literature, in terms of a desire to focus on the personality characteristics of
psychopathy, as opposed to assessing behaviors, lifestyle, and other external manifestations of psychopathy. Finally, this study contributes to the growing knowledge base on psychopathy in women, which has been essentially neglected until recent years.

**Future Directions**

Research on female psychopathy is still in its infancy; therefore there are numerous areas that merit further review and research. Regarding the use of the PPI-R to assess female psychopathy, the relationship between age and psychopathy warrants further exploration. As discussed, the PPI-R was created to theoretically assess the interpersonal, affective, and more personality-driven components of psychopathy (i.e. Factor 1). This would theoretically make the PPI-R more immune to the affects of age. In the PPI-R manual, the authors found that age was unrelated to psychopathy in their incarcerated male sample, but was related to psychopathy in the community/college sample. Essentially, this relationship needs to be examined further in the incarcerated populations.

There are a few areas of research with the Rorschach that could contribute to the growing knowledge base about the psychopathic female, especially in terms of conceptualizing the psychopathic female as having a hysteric/histrionic character. The presence of spoiled responses is an intriguing aspect of the psychopathic profile. It is possible that more relationships between psychopathy and the various self-perception and interpersonal relationships Rorschach variables would become significant when analyzed for the presence of a spoiled response, as found in Cunliffe and Gacono’s (2005) Rorschach study with psychopathic females. These authors initially found that the psychopathic and nonpsychopathic groups did not differ in terms of COP, but with further investigation realized that the psychopathic group produced more spoiled COP responses.
The finding regarding the positive relationship between the FD response and psychopathy score in this study was most intriguing, as it not only was in the opposite direction than expected in this study but it also departed from the findings of one past research study with women (Cunliffe & Gacono, 2005) and the prototypical psychopathic profile constructed by Meloy (1988). Further exploration and replication of this result is necessary in order to interpret this finding most accurately. If after this finding is replicated, this variable could be central to re-writing what it means to be psychologically-minded in terms of the psychopathic syndrome.

In addition, the theory behind the psychopath’s aggression response could be re-evaluated. Specifically, the notion that aggression is too face valid and egosyntonic should be reassessed in the framework for female psychopathy. It appears that the AG response has not been evaluated with incarcerated psychopathic females aside from this study. Furthermore, Meloy and Gacono’s (1992) aggression variables that they developed in response to the limitations of the Comprehensive System AG response could be utilized.
References


APPENDIX

PACIFIC UNIVERSITY
INFORMED CONSENT TO ACT AS A RESEARCH PARTICIPANT

Examination of personality characteristics in a female inmate population using the Rorschach Inkblot Method

Investigator(s) Contact Information

Principal Investigator:
Sarah A. Baird, M.S.
Pacific University
School of Professional Psychology
[phone]
[email]

Faculty Advisor:
Michelle R. Guyton, Ph.D.
Pacific University
School of Professional Psychology
[phone]
[email]

1. Introduction and Background Information

You are invited to be in a research study of personality. You were invited to participate because you are a client at the Coffee Creek Correctional Facility in the Oregon Department of Corrections. You were either chosen by a staff member and/or volunteered to participate on your own. Please read this form carefully and ask any questions you may have before agreeing to be in this study.

This study is being conducted by Sarah Baird, M.S. and Michelle Guyton, Ph.D. The purpose of this study is to learn more about personality characteristics. Personality can influence many parts of your life, such as your relationships and your feelings about yourself. It is believed that personality characteristics might look different in men and women. Therefore, this study will examine personality characteristics in women. Also, personality traits will be examined by two different measures (or tests) that have not been used together before.

2. Study Location and Dates

The study is expected to begin in December 2007 and to be completed by May 2008. The location of the study will be the Coffee Creek Correctional Facility.
One part of the study will be done in a private examination room with just you and the investigator. The other part of the study will be conducted in a group room, possibly with other participants in the same room. The Coffee Creek Correctional Facility security staff will be able to see in the rooms through windows.

3. Procedures

If you agree to be in this study, we will ask you to participate in two different stages. The first stage will involve responding to a written questionnaire. This questionnaire will take approximately 20-30 minutes to complete and will ask you about your personality and your relationships with other people. The second stage will involve sharing your responses to a series of test cards. This stage will be administered individually and take approximately 1 hour to complete.

4. Participants and Exclusion

Only participants who meet the following conditions will be included in the study: females who are 18 years or older, are fluent in the English language, can read at a 4th grade level, and are behaviorally and emotionally stable enough to participate. This information will be obtained from your file at the Oregon Department of Corrections (but we will not be adding any new information to your file). Participants who do not meet the above criteria will be excluded from the study.

5. Risks and Benefits

There are risks and benefits to participating in this research. Possible risks include being slightly uncomfortable while you are answering the test questions and/or feeling uncomfortable after answering questions about your personality. These risks are unlikely to occur, and if they do occur, they will likely result in a small amount of distress and/or discomfort. If it is determined that participation in this study is causing more harm than good then the investigator will end the study.

Possible benefits include learning something new about yourself during this study. Specifically, you might learn something about your personality and your relationships with other people.

6. Alternatives Advantageous to Participants

Not applicable.

7. Participant Payment

You will not receive payment or compensation for your participation.
8. Promise of Privacy

The records of this study will be kept private. The information obtained from this study is strictly confidential, except if we were to learn that you were in danger of harming yourself. Each participant will be assigned a number so that no name or identifiable information is associated with the information given by the participant. Data will be kept in a locked cabinet at the correctional facility and only the investigator, faculty advisor, and research assistants will have access to the data. The data will not be added to your file at the correctional facility. Some data will be entered in a computer program but will be immediately erased when scoring is complete. Access to the computer programs is protected by a password. This informed consent form will be kept separate from any data we collect. If the results of this study are to be presented or published, we will not include any information that will make it possible to identify you as an individual.

9. Voluntary Nature of the Study

Your decision whether or not to participate will not affect your current or future relations with Pacific University. Your decision whether or not to participate will not affect your current or future relations with the Oregon Department of Corrections. If you decide to participate, you are free to not answer any question or withdraw at any time without prejudice or negative consequences.

10. Compensation and Medical Care

During your participation in this project you are not a Pacific University clinic patient or client, nor will you be receiving complete mental health care as a result of your participation in this study. If you are injured during your participation in this study and it is not the fault of Pacific University, the researchers, or any organization associated with the experiment, you should not expect to receive compensation or medical care from Pacific University, the researchers, or any organization associated with the study. If needed, you may be referred to Health Services and/or Counseling and Treatment Services at Coffee Creek Correctional Facility.

11. Contacts and Questions

The researcher(s) will be happy to answer any questions you may have at any time during the course of the study. The researcher(s) can be reached by telephone at (xxx)xxx-xxxx. If you are not satisfied with the answers you receive, please call Pacific University’s Institutional Review Board, at (xxx)xxx-xxxx to discuss your questions or concerns further. All concerns and questions will be kept in confidence.
12. Statement of Consent

I have read and understand the above. I grant permission to the investigator to access my Oregon Department of Corrections file so as to determine my eligibility for participating in this study. All my questions have been answered. I am 18 years of age or over and agree to participate in the study. I have been given a copy of this form to keep for my records.

Participant's Signature                                      Date

Participant mailing address:
Address: ________________
          ________________
          ________________

This contact information is required in case any issues arise with the study and participants need to be notified and/or to provide participants with the results of the study if they wish.

Would you like to have a summary of the results after the study is completed?  
___Yes ____No

Would you be interested in participating in other psychological research studies?  
_____ Yes _____ No

Investigator's Signature                                    Date
Sarah A. Baird, M.S.

Participant's Signature                                      Date